Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
WHAT HAVE BEEN AND THE STATE OF	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Renet Middle name JAEUSS - Lenet Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xx - xx OR 9 xx - xx	xxx - xx

(See 28 U.S.C. § 1408.)

Doc 1

(See 28 U.S.C. § 1408.)

Reper Jazoby-Connedy
Middle Name Last Name Case number (if kn Debtor 1

Pa	rt 2: Tell the Court About	Your Bar	krupte	cy Case			
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file	☐ Chapter 7					
	under	☐ Chapt	er 11				
	·	☐ Chapt	er 12				
		☐ Chapt	er 13				
8.	How you will pay the fee	local o yours subm	court fo elf, you itting yo	r more details	about how you m cash, cashier's c n your behalf, you	nay pay. Typicall heck, or money	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check
		I need	d to pa	y the fee in in or Individuals t	stallments. If yo to Pay The Filing	u choose this op Fee in Installme	otion, sign and attach the ents (Official Form 103A).
		By lav less t	w, a jud han 15 ne fee i	ige may, but is 0% of the offici in installments)	not required to, ial poverty line th o If vou choose ti	waive your fee, a at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is a rfamily size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have you filed for	D No					
	bankruptcy within the last 8 years?	☐ Yes.	District		When	MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
1	o. Are any bankruptcy	Q No					
	cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an		District		Wher	MM/DD/YYYY	Case number, if known
	affiliate?						Relationship to you
					When		Case number, if known
			Diotion		-	MM / DD / YYYY	•
1	1. Do you rent your residence?	□ No. □ Yes.	☐ No	our landlord obta			u? nt Against You (Form 101A) and file it as

page 3

15,00	Rener	JACUBS-16Ared-
Clast Name	Middle Name	Lost Name

Case number (if known)		

. Are you a sole proprietor	No. Go to Part 4.
of any full- or part-time business?	Yes. Name and location of business
A sole proprietorship is a	
business you operate as an individual, and is not a separate legal entity such as	Name of business, if any
a corporation, partnership, or LLC.	Number Street
If you have more than one sole proprietorship, use a separate sheet and attach it	
to this petition.	City State ZIP Code
	Check the appropriate box to describe your business:
	Health Care Business (as defined in 11 U.S.C. § 101(27A))
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
	Commodity Broker (as defined in 11 U.S.C. § 101(6))
	None of the above
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part 4: Report if You Own	or Have Any Hazardous Property or Any Property That Needs Immediate Attention
4. Do you own or have any	□ No
property that poses or is alleged to pose a threat	☐ Yes. What is the hazard?
of imminent and identifiable hazard to public health or safety?	
Or do you own any property that needs immediate attention?	If immediate attention is needed, why is it needed?
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	
	Where is the property? Number Street

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

page 5

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I Com pener Jack Cennedy
First Name Middle Name Last Name

Case number	(if known)		

		162 Are your debte nrimari	ly consumer debts? Consumer debts	are defined in 11 U.S.C. § 101(8)			
	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	you navo:	☐ No. Go to line 16b. ☑ Yes. Go to line 17.					
		16b. Are your debts primari money for a business or inv	ly business debts? Business debts a restment or through the operation of the b	re debts that you incurred to obtain ousiness or investment.			
		No. Go to line 16c. Yes. Go to line 17.					
		16c. State the type of debts you	owe that are not consumer debts or business.	ness debts.			
17.	Are you filing under Chapter 7?	☐ No. I am not filling under Ch	napter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	Yes. I am filing under Chapt administrative expense	er 7. Do you estimate that after any exem s are paid that funds will be available to d	pt property is excluded and distribute to unsecured creditors?			
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes					
42	How many creditors do	☑ 1-49	1 ,000-5,000	25,001-50,000			
10.	you estimate that you	50-99	5 ,001-10,000	50,001-100,000 More than 100,000			
	owe?	☐ 100-199 ☐ 200-999	10,001-25,000	More trian 100,000			
	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion			
13.	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion			
	be worth?	☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	□ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
20	How much do you	☐ \$0-\$50,000	☐ \$1,000,001-\$10 million	\$500,000,001-\$1 billion			
20.	estimate your liabilities	3 50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion			
	to be?	\$100,001-\$500,000	☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
P	art 7: Sign Below	☐ \$500,001-\$1 million	—				
	or you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and			
		of title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, I understand the relief available under ea	ach chapter, and I choose to proceed			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		* mo	*				
		Signature of Debtor 1	Signatu	ire of Debtor 2			
		Executed on 9 26	2016 Execute	ed on			

Kin	Penen	JALUNY	Lunnelly
First Name	Middle Name	Last Name	

Case number	(if known)	 	 _

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email addro	ess

JAZJAG -14 Tred

Case number ut

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also he familiar with any state exemption laws that apply.

Do farming that any other ones,		
Are you aware that filing for bankruptcy is a serious acti consequences?	on with long-ten	m financial and legal
□ No ☑ Yes		
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor	and that if your ned?	bankruptcy forms are
□ No ☑ Yes		
Did you pay or agree to pay someone who is not an atternoon Did yes. Name of Person		
Attach Bankruptcy Petition Preparer's Notice, Dec	laration, and Sig	nature (Official Form 119).
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if	that filing a bank	ruptcy case without an
: ha	`	
Signature of Debtor 1	Signature of De	btor 2
Date 9 26 2018	Date	MM / DD / YYYY
Contact phone	Contact phone	
Cell phone 248-514-5335	Cell phone	
Email address	Email address	

Certificate Number: 15725-MIE-CC-031436698



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>August 7, 2018</u>, at <u>10:39</u> o'clock <u>AM EDT</u>, <u>Kim Jacobs Kennedy</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	August 7, 2018	Ву:	/s/Johon Cano
		Name:	Johon Cano
		Title:	Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

tor 1	Kim	Renea	Jacobs-I	Kennedy	
HOI I	First Name		Middle Name	Last Name	
otor 2 ouse, if filing)	First Name		Middle Name	Last Name	
United States Bankruptcy Court for the: Eastern District of Michigan					

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	0.00
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$18,161.63
1c. Copy line 63, Total of all property on Schedule A/B	\$18,161.63
Mittee as former labor	
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
s. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$139,493.28
Your total liabilities	139,493.28
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$3,898.32
Copy your combined monthly income from line 12 of Schedule I	·

Kim

Renea

Jacobs-Kennedy

Case number (if known)_____

P:	art 4: Answer These Questions for Administrative and Statistical Records		
-	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this for✓ Yes	rm to the court with your other	schedules.
7.	What kind of debt do you have?		de manuel en
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an i family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	individual primarily for a persones. 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box an	d submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$4,678.64
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
	9d. Student loans. (Copy line 6f.)	\$1,329.52	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
	9g. Total. Add lines 9a through 9f.	s1,329.52	

Fill in this information to identify your case and this filing:					
Dobtor 1	Kim	Renea	Jaco	bs-Kennedy	
Debtor 1	First Name	Middle	Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name	
United States Bankruptcy Court for the: Eastern District of Michigan					
Case number					
				_	

☐ Check if this is an amended filing

Describe the nature of your ownership

interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property

Official Form 106A/B

City

County

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ■ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the portion you own? entire property? Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ■ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the portion you own? entire property? Manufactured or mobile home ☐ Land Investment property

property identification number:

At least one of the debtors and another

Debtor 1 and Debtor 2 only

Who has an interest in the property? Check one.

Other information you wish to add about this item, such as local

□ Timeshare

Debtor 1 only
Debtor 2 only

State

ZIP Code

.3.			What is the property? Check all that apply. Single-family home	the amou	educt secured clal unt of any secured s Who Have Claim	claims or s Secure	n Schedule D: d by Property.
	Street address, if available, o	or other description	 Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home 		t value of the property?	Current portion	t value of the you own?
	City	State ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other	interes	be the nature o t (such as fee s tireties, or a life	simple, 1	tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(se	eck if this is co e instructions) as local	mmunit	y property
dd t	the dollar value of the ponave attached for Part 1.	ortion you own for a Write that number	all of your entries from Part 1, including any entried here.	s for pag	jes →	\$	0.00
own	own, lease, or have lega that someone else drives	al or equitable inter s. If you lease a vehi	est in any vehicles, whether they are registered or cle, also report it on Schedule G: Executory Contracts	not? Incl	lude any vehicle xpired Leases.	s	
ou own	own, lease, or have lega that someone else drives s, vans, trucks, tractors,	al or equitable inter s. If you lease a vehi	cle, also report it on Schedule G: Executory Contracts	not? Incl and Une	lude any vehicle xpired Leases.	S	ar errer Geschiele
ou own ars	own, lease, or have lega that someone else drives s, vans, trucks, tractors,	al or equitable inter s. If you lease a vehi sport utility vehicle Dodge	cle, also report it on Schedule G: Executory Contracts es, motorcycles Who has an interest in the property? Check one.	Do not	deduct secured c	aims or e	on Schedule D:
ou own ars	own, lease, or have legal that someone else drives, vans, trucks, tractors, No Yes Make: Model: Year:	al or equitable inter s. If you lease a vehi sport utility vehicle	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not the am Credito	deduct secured C	alms or e ed claims ims Secui Curre	on Schedule D: red by Property.
ou own ars	own, lease, or have legal that someone else drives, vans, trucks, tractors, No Yes Make: Model:	al or equitable inters. If you lease a vehicle sport utility vehicle Dodge journey 2010	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not the am Credito	deduct secured control of any securors Who Have Cla	alms or e ed claims ims Secui Curre	on Schedule D: red by Property. ent value of the
ou cars NZIN	own, lease, or have legal that someone else drives, vans, trucks, tractors, No Yes Make: Model: Year: Approximate mileage:	or equitable inters. If you lease a vehicle sport utility vehicle Dodge journey 2010 170,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not the am Credito	deduct secured concent of any securors Who Have Claust Value of the property?	alms or e ed claims ims Secui Curre	on Schedule D: red by Property. ent value of the on you own?
ou cars NZIN	own, lease, or have legal that someone else drives, vans, trucks, tractors, No res Make: Model: Year: Approximate mileage: Other information:	Dodge journey 2010 170,000 one, describe here:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not the am Creditor entire	deduct secured count of any securiors Who Have Clasent value of the property? 500.00	laims or ed claims ims Security Curre portion \$	on Schedule D: red by Property ant value of the on you own? 0.00 exemptions. Put s on Schedule D:
ou area area area area area area area are	own, lease, or have legal that someone else drives, vans, trucks, tractors, No res Make: Model: Year: Approximate mileage: Other information:	al or equitable inters. If you lease a vehicle sport utility vehicle Dodge journey 2010 170,000 one, describe here:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not the am Creditors S Do not the am Creditors Curre	deduct secured count of any securors Who Have Clasent value of the property?	laims or e ed claims ms Secur Curre portion \$	on Schedule D: red by Property ant value of the on you own? 0.00 exemptions. Put s on Schedule D:

Jacobs-Kenne dy

Renea

tor 1	First Name Middle	Name	Last Name Case number (# ka		
3.3.	Make: Model: Year: Approximate mileage: Other information:	Chrysler Patriot 2017 60,000	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
3.4.	Make: Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule Dans Secured by Property. Current value of the portion you own?
			☐ Check if this is community property (see instructions)	\$	\$
	rcraft, aircraft, motor h aples: Boats, trailers, mo o es				aims or exemptions. Put d claims on <i>Schedule D</i> : ms Secured by Property.

4.2.	Make:	
	Model:	
	Year:	
	Other infor	mation:

Who has an interest in the property? Check one.

Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Kim Renea Jacobs-Kennedy

7	 ķ,	 	

Case number (if known)_

Part 39 Describe Your Personal and Household Items

Do	you own or have any l	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	• • • • • • • • • • • • • • • • • • • •	furnishings nces, furniture, linens, china, kitchenware	
	No Yes. Describe	washer and dryer, refrigerator and stove, microwave, couch, dining table, kitchen table, one bedroom set, 3 beds and 3 dressers	\$\$
7.	collections;	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	
	No Yes, Describe	2 televisions	\$\$
8.	stamp, coin, No	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	-
	Yes. Describe		\$
9.	and kayaks;	and hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cances carpentry tools; musical instruments	
	☑ No ☐ Yes. Describe		\$
10	. Firearms <i>Examples:</i> Pistols, rifles	, shotguns, ammunition, and related equipment	TO COLUMN TO THE
	No Yes. Describe	9mm and a small hand gun	\$\$
11		thes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☐ Yes. Describe	winter coats, purses, shoes, clothes,	\$\$
12	. Jewelry Examples: Everyday jev gold, silver	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
		gold earrings, necklace with a cross, watch	\$
13	 Non-farm animals Examples: Dogs, cats, I No 	pirds, horses	
	Yes. Describe		\$
14		d household items you did not already list, including any health aids you did not list	
	☐ No ☐ Yes. Give specific information		\$
15		f all of your entries from Part 3, including any entries for pages you have attached umber here	<u>\$2,900.00</u>

Debtor	1

Kim

Renea

Jacobs-Kennedy

Case number	(if known)		

Elect Name Middle Na

Last Nan

Bort 4	Describe Veur Einemalel Assets		

	ve any legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash		ne, in a safe deposit box, and on hand when you file your petition	
□ No			
		Cash:	\$\$
17. Deposits of mo <i>Examples:</i> Chec	cking, savings, or other financial accou	unts; certificates of deposit; shares in credit unions, brokerage ho nultiple accounts with the same institution, list each.	uses,
□ No			
☑ Yes		Institution name:	
	17.1. Checking account:	PNC Bank 4231649294	\$200.00
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		\$
	17.7. Other financial account:		
	17.8. Other financial account:		<u> </u>
	17.9. Other financial account:		
	17.5. Other infancial account.		\$
	funds, or publicly traded stocks funds, investment accounts with brok Institution or issuer name:	terage firms, money market accounts	\$\$
Examples: Bond No Yes	funds, investment accounts with brok	erage firms, money market accounts prated and unincorporated businesses, including an interest	\$ \$
Examples: Bond No Yes	funds, investment accounts with brok Institution or issuer name: aded stock and interests in incorporship, and joint venture	prated and unincorporated businesses, including an interest	\$ \$ in
Examples: Bond No Yes 19. Non-publicly tr an LLC, partne No Yes. Give sp	aded stock and interests in incorporship, and joint venture Name of entity:		\$sin
Examples: Bond No Yes 19. Non-publicly tr an LLC, partne	aded stock and interests in incorporship, and joint venture Name of entity:	orated and unincorporated businesses, including an interest % of ownership	\$\$ \$\$

Debtor 1	Kim	Renea	Jacobs-Kenne	Case number (# known)
	First Name	Middle Name I	ast Name	

rom an	The second s				
20	. Government and corpo	rate bonds and other	er negotiable and non-negotiable instruments		
	Negotiable instruments i	nclude personal check	ks, cashiers' checks, promissory notes, and money orders.		
	Non-negotiable instrume	nts are those you can	not transfer to someone by signing or delivering them.		
	🗹 No				
	Yes. Give specific	Issuer name:			
	information about them			\$	
	u1611			•	
				*	
				Ψ	
	D-4!				
21	. Retirement or pension Evenues: Interests in IF		11(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	□ No	v., E. (107., 100g), 40	T(n), 400(b), think savings assessme, or saller periods or profit straining plants		
	Yes. List each				
	account separately.	Type of account:	Institution name:		
		40401		\$	
		401(k) or similar plan:	William Beaumont Hospital	Ψ	15,011.63
		Pension plan:		\$	
		IRA:		\$	····
		Retirement account:		\$	
		Newement account.		<u> </u>	
		Keogh:		\$	
		Additional account:		\$	
		Additional account:		\$	
				Υ	
22	Security deposits and p				
			ade so that you may continue service or use from a company		
	companies, or others	with landlords, prepaid	d rent, public utilities (electric, gas, water), telecommunications		
	☑ No				
	☐ Yes		titution name or individual:		
		Electric:		\$	
		Gas:		\$	
		Heating oil:		\$	
		Security deposit on ren	tal unit:	\$	
		Prepaid rent:		\$	
		Telephone:		Ψ	
	·	Water:		\$	
				\$	
		Rented furniture:		\$	
		Other:		\$	
23	. Annuities (A contract fo	r a periodic pavment o	of money to you, either for life or for a number of years)		
	☑ No	harman hadanan	• · · • · · · · · · · · · · · · · · · ·		
	☐ Yes	ال الحجم مصم مصط	orintion:		
	□ 165	Issuer name and des	GIPHOII.	œ.	
				\$	
				a	

Kim Renea Jacobs-Kennedy

Case number (# known)

er kontrikter var kontrikter it gide om med met en en med det det de formet begre met grænere, men en en ste som en e	White the things of the control of t	
	n account in a qualified ABLE program, or under a qualified state tuition progra	т. Т.
26 U.S.C. §§ 530(b)(1), 529A(b), an	a 529(b)(1).	
☑ No		
☐ YesInsti	tution name and description. Separately file the records of any interests.11 U.S.C. § 5	21(c):
		•
		\$
		\$
		\$
25. Trusts, equitable or future interes exercisable for your benefit	is in property (other than anything listed in line 1), and rights or powers	
☑ No		
Yes. Give specific		
information about them		\$
L		
26. Patents, copyrights, trademarks,	rade secrets, and other intellectual property	
Examples: Internet domain names,	vebsites, proceeds from royalties and licensing agreements	
☑ No		
Yes. Give specific		
information about them		\$
L		** works with
27. Licenses, franchises, and other g	eneral intangibles re licenses, cooperative association holdings, liquor licenses, professional licenses	
	e ilicenses, cooperative association floidings, liquor licenses, professional licenses	
☑ No		
Yes. Give specific information about them		s
information about them		Φ
Money or property owed to you?		
money or property owed to your		Current value of the portion you own?
		Do not deduct secured
		claims or exemptions.
28. Tax refunds owed to you		
🗹 No		
☐ Yes. Give specific information	Fadaul	•
about them, including whetl	ner Federal:	\$
you already filed the returns and the tax years		\$
and the tax years	Local:	\$
29. Family support		
	mony, spousal support, child support, maintenance, divorce settlement, property settle	ement
☑ No		
Yes. Give specific information		
Tes. Give specific information	Alimony:	\$
	Maintenance:	\$
	Support:	\$
		Ψ
		œ
	Divorce settlement:	\$
		_
30. Other amounts someone owes yo	Divorce settlement: Property settlement	s \$
Examples: Unpaid wages, disability	Divorce settlement: Property settlement u insurance payments, disability benefits, sick pay, vacation pay, workers' compensation	s \$
Examples: Unpaid wages, disability Social Security benefits;	Divorce settlement: Property settlement	s \$
Examples: Unpaid wages, disability Social Security benefits; No	Divorce settlement: Property settlement uninsurance payments, disability benefits, sick pay, vacation pay, workers' compensation unpaid loans you made to someone else	\$
Examples: Unpaid wages, disability Social Security benefits;	Divorce settlement: Property settlement uninsurance payments, disability benefits, sick pay, vacation pay, workers' compensation unpaid loans you made to someone else	s \$

Kim

Renea Jacobs-Kennedy

Politika i Militari (1844-1966). Palit mataut i Palitika birana lilakiranda birahan amempuluk 1976, 1976, 1976 Tanahan	distribution () () () () () () () () () (^{പ്ര} ട്ടിയെ നിന്നും ക്രിയ്യ് തീട്ടിന്നു വര്യായ പ്രകാരം പ്രകാരം ക്രാവാൻ വ്യാരണം വരു പ്രസ്താന വര്യായ അവരെ വര്യാർത് പ്രത്യാത്തിലെ പ്രത്യാത്തിലെ വര്യാത്തില്ലായ പ്രവര്ത്തില്ലായ പ്രത്യാത്തില്ലായ വര്യാത്തില്ലായില്ലായില്ലായില്ലായില	anderen. Hen un deutschen sowie einer im demekkelt Morten wird. Dere ein Brucht geweit dem eine die Helbert.
31. Interests in insurance policies			
Examples: Health, disability, or life insurar	nce; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
☑ No			
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
			•
			\$
			\$
32. Any interest in property that is due you	from someone who has died		
If you are the beneficiary of a living trust, e property because someone has died.	expect proceeds from a life insurar	nce policy, or are currently entitled to receive	
☑ No			
Yes. Give specific information			
			\$
	k		
33. Claims against third parties, whether or			
Examples: Accidents, employment dispute	es, insurance claims, or rights to si	Je	
☑ No	p		, and a second second
Yes. Describe each claim			
			\$
34. Other contingent and unliquidated clain	ns of every nature, including co	unterclaims of the debtor and rights	
to set off claims			
No			-
Yes. Describe each claim			
l			\$
35. Any financial assets you did not already	. Not		
· · · · · · · · · · · · · · · · · · ·	/ list		
☑ No		## ### 1.444 ###########################	
Yes. Give specific information			\$
•			
36. Add the dollar value of all of your entrie	es from Part 4. including any ent	tries for pages you have attached	15 061 60
for Part 4. Write that number here			→ \$ 15,261.63
aggodines alea Antinestra, emala em Lastinente tras benadas, tras emas, etc. pas profesiones in em provincio,	والمرابعة	төөсүүн байда байданын доо курын оруулган оруулган оруун байдагуу таан нуу өөсөн турын оруун оруун оруун оруун Э	g a reconstruitiese () stratteres _{aut} a y digitale land fortuitenen totalija in eksept ett rolet, u digitale
Part 5: Describe Any Business-	Related Property You Ov	⁄n or Have an Interest In. List ar	ny real estate in Part 1.
		<u> </u>	
37. Do you own or have any legal or equital	ole interest in any business-rela	ted property?	
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the
			portion you own?
			Do not deduct secured claims
			or exemptions.
38. Accounts receivable or commissions yo	ou already earned		
☐ No			
Yes. Describe			
			\$
39. Office equipment, furnishings, and sup	plies		**************************************
Examples: Business-related computers, software	-	ines, rugs, telephones, desks, chairs, electronic de	vices
□ No	s, mouems, printers, copiers, rax macir		
LLII INO	e, moderns, printers, copiers, rax macr		
PAGE 1-100 - 100 -	e, moderns, printers, copiers, rax madr	***************************************	
Yes. Describe	e, moderns, princers, copiers, rax madr		\$

Kim Renea Jacobs-Kennedy Debtor 1 Case number (#known)_ Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 41. Inventory ☐ No ☐ Yes. Describe..... 42. Interests in partnerships or joint ventures Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... \$_ 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

Current value of the portion you own? Do not deduct secured claims

or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No

☐ Yes.....

Debtor 1	Kim	Renea	Jac	cobs-K	ennedy	Case number (if known)		
	First Name	Middle Name Last Na	me		/	oase namosi (ii siomi)		
48. Crop :	s—either growin	g or harvested						
□ N				·	The second section of the second second section second section second section	A Professional and a second	 1	
	es. Give specific formation						\$	
		pment, implements, mac	hinery, fixture	s, and too	ols of trade			
U N U Y	o es			ety-senstanaan vascoretetta	**************************************		<u>-</u>	
							\$	
50. Farm	and fishing sup	olies, chemicals, and feed	i					
□ N	o es		O A A A Thirt is the sale of t				······································	
	GS						s	
51. Any fa	arm- and comme	ercial fishing-related prop			/ list	Plante of the season and the season		_
	o es. Give specific	****	***************************************		W-TTT			
	formation						\$	
52. Add t	he dollar value o	of all of your entries from	Part 6, includi	ng any ei	ntries for pages	you have attached	s	0.00
tor Pa	art 6. Write that n	lumber here	and the second state of the second se	and the second s	roman roman - modernam - se um roman - mara	.		en e
	.							
Part 7:	Describe A	All Property You Ow	n or Have a	an inter	rest in That	You Did Not List Above	•	
		pperty of any kind you did country club membership	d not already li	st?				
Z No				*************	**************************************			
	es. Give specific formation						\$ \$	
							\$	
4 4 4 4 4 1					_			0.00
54. Add ti	ne dollar value o	f all of your entries from	Part 7. Write th	at numb	er here	→	\$	
Part 8:	List the To	otals of Each Part o	f thic Form	Mi Transcondername generalis	elleliki - serimin i serimin il serimine il segmente il segmente	obilisele mitten meden er insent i insi gen inhelst blir infection i del els houses,	and the second of the second o	a a constituti (il magnetorium), glidai antiqui futiti uso adapunten uso agru-
							 	
55. Part 1	: Total real estat	e, line 2					\$	0.00
56. Part 2	: Total vehicles,	line 5		\$	0.00			
57. Part 3	: Total personal	and household items, line	9 15	\$	2,900.00			
58. Part 4	: Total financial	assets, line 36		\$	15,261.63			
59. Part 5 .	: Total business	related property, line 45		\$	0.00			
60. Part 6 :	: Total farm- and	fishing-related property,	line 52	\$	0.00			
61. Part 7 :	: Total other pro	perty not listed, line 54		+\$	0.00			
62. Total	personal propert	y. Add lines 56 through 61.			18,161.63	Copy personal property total	L .	18,161.63
	, p. opol e	,				Copy personal property total -	- 3_	The statement of the st
63. Total 6	of all property or	ı Schedule A/B. Add line 5	5 + line 62	•••••			\$	18,161.63
e comprehense en endigis de la comprehense	kan mare ar inema Talentini indalah in indalah	enningen och sig klimate i solg eller sig mang och mod eller enningen er se jaster ger enser en se	na sentan i contanti i continu	* statistical consequences and a second second	mijan gabbarungga para di Maga da Samanana an magaliga samankan	t yakit menjementerak saya sakur saya deterak yara digikan saya sayakan inga sakur kaya yakin karanga sakur maka ya ma		energia i ngapinanganga manggi yanang sini tinggi nan ngabistiga ngapanga nag-ang

Fill in this	information to identify yo		
Debtor 1	Cim Renea	SAC-195	Last Name
Debtor 2 (Spouse, if fi	ling) First Name	Middle Name	Last Name
United Star	tes Bankruptcy Court for the:	District of _	
Case numl (If known)	ber		

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	t 1: Identify the	e Property You Claim	as Exempt		
1.	☐ You are claiming	tions are you claiming? (state and federal nonbank federal exemptions. 11 U.	ruptcy exemptions. 11 t	your spouse is filing with you. J.S.C. § 522(b)(3)	
2.	For any property yo	ou list on Schedule A/B th	nat you claim as exemp	pt, fill in the information below.	
	Brief description of Schedule A/B that I	the property and line on ists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	liances and f	m ² /12m = 500 9.1	any applicable statutory limit	
1	Brief 2 description: Line from Schedule A/B:	televisur	\$ 100,00	\$ (60.60) 100% of fair market value, up to any applicable statutory limit	
	Brief description:	2. 6 un 5	\$_ (00, 63	□ \$(ょう、こう □ 100% of fair market value, up to any applicable statutory limit	
3.	(Subject to adjustm		3 years after that for cas	? ses filed on or after the date of adjustment in 1,215 days before you filed this case?	.)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of __

| Cim Renea JAK-55-lennedy First Name Middle Name Last Name

Case number (# known)_____

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
on schedule And that has and property	Copy the value from Schedule A/B	Check only one box for each exemption	
irief Clotus pur 45 Ar escription: ine from Schedule A/B:	165 8 1900.00	** うつい、うつ 100% of fair market value, up to any applicable statutory limit	
	15c \$ 100,00	\$ 100% of fair market value, up to any applicable statutory limit	
Brief Jescription: Line from Schedule A/B:	\$ 50,00	100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ 200,00	□ 100% of fair market value, up to any applicable statutory limit	
Brief description: Par 2000 Description: Par 2000 Description Desc	s 15,04 163	□ \$15,011.63 □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit)

Official Form 106C

Brief

description:

Line from Schedule A/B:

Schedule C: The Property You Claim as Exempt

\$

☐ 100% of fair market value, up to

any applicable statutory limit

page <u>2</u> of __

ebtor 1	Kim	Renea	Jacobs-Kenned			
	First Name	Middle Name	Last Name			
ebtor 2						
ouse, if filing)) First Name	Middle Name	Last Name			
ited States	Bankruptcy Court for the: E	Eastern District of Mi	ichigan			
se number						
known)					☐ Check	
					amend	ed filing
Missial	Form 106D					
iched	lule D: Cred	litors Who	Have Claims Sec	ured by Pro	perty	12/15
as comp	lete and accurate as n	ossible If two mar	ried people are filing together, both a	re equally reenengible	for supplying correc	+
ormation.	. If more space is need	led, copy the Addit	ional Page, fill it out, number the ent	ries, and attach it to thi	s form. On the top of	anv
ditional pa	ages, write your name	and case number	(if known).			 ,
	reditors have claims se					
Mo. Ch	neck this box and submi	t this form to the cou	art with your other schedules. You have	nothing else to report on	this form.	
Yes. F	ill in all of the informatio	n below.				
rt 1: Li:	st All Secured Clair	ns				
				Column A	Column B	Column
List all sec	cured claims. If a credit	tor has more than or	ne secured claim, list the creditor separa	ately Amount of claim	Value of collateral	Unsecu
for each cl As much a	laim. It more than one c	reditor has a particu	lar claim, list the other creditors in Part der according to the creditor's name.	DO HOL GEGGGG GIE	that supports this	portion
ns much a	is possible, list the claim	is in aiphabetical bit	iei according to the creditor's name.	value of collateral.	claim	If any
		Describe	the property that secures the claim:	\$	\$	\$
Creditor's Na	me					
Number	Street					
		As of the	date you file, the claim is: Check all that	apply.		
		Contin	_			
City	State ZIF	Code Unliqu				
•		- Disput				
	the debt? Check one.	Nature of	lien. Check all that apply.			
Debtor 1		_	reement you made (such as mortgage or sec	ured		
Debtor 2	•	car loa Statute	•			
_	and Debtor 2 only		ory lien (such as tax lien, mechanic's lien) nent lien from a lawsuit			
At least o	one of the debtors and anoth		(including a right to offset)			
	f this claim relates to a	- Other	anddding a right to onsety			
	nity debt					
ate debt w	as incurred	Last 4 dig	gits of account number	AND THE PROPERTY OF THE PROPER	or and the same as the same and	معالم والووادية فإراع بالمستريناتين
		Describe	the property that secures the claim:	\$	_ \$	\$
Creditor's Na	me					
	Oh			!		
N	Street		date you file, the claim is: Check all that			
Number			date vou nie. me ciaim is: Check all that	addiv.		
Number		_	•			
Number		Contin	gent			
Number	State ZIF	Contin	gent idated			
City		Contin	gent idated ed			
City Vho owes t	the debt? Check one.	Contin	gent idated ed ilien. Check all that apply.			
City Who owes to Debtor 1	the debt? Check one.	Contin	gent idated ed Ilien. Check all that apply. reement you made (such as mortgage or sec			
City Vho owes t Debtor 1 Debtor 2	the debt? Check one. only only	Contin	gent idated ed illen. Check all that apply. reement you made (such as mortgage or sec in)			
City Who owes t Debtor 1 Debtor 2 Debtor 1	the debt? Check one. only and Debtor 2 only	Continuity Code Code Code Code Code Code Code Code	gent idated ed Ilien. Check all that apply. reement you made (such as mortgage or sec			
City Who owes t Debtor 1 Debtor 2 Debtor 1 At least o	the debt? Check one. only only and Debtor 2 only one of the debtors and another	Contin Unlique Disput Nature of An agr car loa Statute Her Unlique Unl	gent idated ed ilen. Check all that apply. reement you made (such as mortgage or secun) ory lien (such as tax lien, mechanic's lien)			
City Who owes to Debtor 1 Debtor 2 Debtor 1 At least of Check if	the debt? Check one. only only and Debtor 2 only one of the debtors and anoth	Contin Unlique Disput Nature of An agr car loa Statute Her Unlique Unl	gent idated idated ilien. Check all that apply. reement you made (such as mortgage or secun) ory lien (such as tax lien, mechanic's lien) nent lien from a lawsuit			
City /ho owes t Debtor 1 Debtor 2 Debtor 1 At least o Check if	the debt? Check one. only only and Debtor 2 only one of the debtors and another	Contin Unliqu Disput Nature of An agr car los Statute her Judgm Other	gent idated idated ilien. Check all that apply. reement you made (such as mortgage or secun) ory lien (such as tax lien, mechanic's lien) nent lien from a lawsuit			

Fill in this i	nformation to id	lentify your case:	
Debtor 1	Kim	Renea	Jacobs-Kennedy
Deptor	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing) First Name	Middle Name	Last Name
United States	Bankruptcy Court	for the: Eastern District of	Michigan
Case number (if known)	·		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pai	rt 1: List Ali of Your PRIORITY Unsecure	ed Claims			
2	each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the c	editor has more than one priority unsecured claim, list th a claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim	at claim here at ame. If you hav	nd show both e more than to creditors in Pa Priority	priority and wo priority
2.1	Priority Creditor's Name Number Street City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	Last 4 digits of account number		\$	\$
2.2	Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number	<i>.</i>	\$	\$

18-53127-mlo Page 25 of 70 Doc 1 Filed 09/26/18 Entered 09/26/18 13:51:06

Kim Renea Jacobs-Kennedy

Case number	(if known)		

Aft		beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number	\$	<u> </u>	\$
	Number Street	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		_			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
	•	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
		 Claims for death or personal injury white you were intoxicated 			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes				
			s	\$	e
	Priority Creditor's Name	Last 4 digits of account number	<u> </u>		Ψ
		When was the debt incurred?			
	Number Street				
	-	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated			
		Other. Specify			
	Is the claim subject to offset?				
	□ No				
_	Yes				
		Last 4 digits of account number	\$	_ \$	\$
	Priority Creditor's Name	·			
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
		☐ Disputed			
	Who Incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	_	Claims for death or personal injury while you were intoxicated	-		
	☐ Check if this claim is for a community debt	Other. Specify			
	is the claim subject to offset?				
	□ No				
	П v				

Debtor :	1

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/I II IC	O	
	Case number (if known)	

All of Your NONPRIORITY Unsecured Claims

Ган	List Air of Your Non-Kiok	4111 0115	coured Glainis					
ļ	Do any creditors have nonpriority uns No. You have nothing to report in this Yes				and common properties for the second	- Table III on provide Algebra	dies la colonies de la colonie	
i i	List all of your nonpriority unsecured nonpriority unsecured claim, list the cred noluded in Part 1. If more than one cred claims fill out the Continuation Page of P	itor separa itor holds a	itely for each claim.	For each claim listed, identify wha	it type of claim it	t is. Do not l	ist claim priority	s aiready unsecured
						2	Total	laim
.1	Ally			Last 4 digits of account number	<u>8 0 5 0</u>	<u> </u>	•	4,000.00
	Nonpriority Creditor's Name PO Box 380902			When was the debt incurred?	2017	;	\$	
	Number Street Bloomington	MN	55438-0902					W Probabilities annice of the second
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that	apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			☑ Contingent☑ Unliquidated☑ Disputed Type of NONPRIORITY unsecu	red claim:			
	At least one of the debtors and another			Student loans				
	☐ Check if this claim is for a commun	nity debt		Obligations arising out of a separ that you did not report as priority		or divorce		
	Is the claim subject to offset?			Debts to pension or profit-sharing		similar debts		
	☑ No □ Yes			Other. Specify Lease				
	The state of the s	MINISTER STATEMENT OF THE STATEMENT OF T	·····································	akt II. at the water is tradelikelet. While make in the wholess himself is the country to control to the count	6 5 8	9	ACAUTA COUNTY	1,788.55
1.2	Alliance Catholic Credit Union			Last 4 digits of account number	6 5 8	-	\$	1,7,00.00
	Nonpriority Creditor's Name 9300 Cooper St.			When was the debt incurred?				
	Number Street Taylor	MI	48180	As of the date you file, the claim	is: Check all that	apply.		
	City	State	ZIP Code	Contingent Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only			☐ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:			
	Debtor 1 and Debtor 2 only			☐ Student loans				
	At least one of the debtors and another Check if this claim is for a communication.	nitu daht		Obligations arising out of a sepa	ration agreement o	or divorce		
	Is the claim subject to offset?	mily debt		that you did not report as priority Debts to pension or profit-sharing	g plans, and other	similar debts		
	No			Other. Specify Credit Card				
	☐ Yes							
4.3	Amazon Credit Cards	(a) display to the same of the		Last 4 digits of account number		5	•	3,010.87
	Nonpriority Creditor's Name PO Box 94014			When was the debt incurred?	2008		Ψ	
	Number Street Palatine	IL	60094-4014					
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that	apply.		
	•	0.2.0	3 4	☑ Contingent				
	Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated☐ Disputed				
	Debtor 2 only			•				
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsec	ured claim:			
				Student loans				
	☐ Check if this claim is for a commu	nity debt		 Obligations arising out of a sepa that you did not report as priority 		or divorce		
	Is the claim subject to offset? ☑ No			Debts to pension or profit-sharing Other. Specify Credit Card	o plans, and other	similar debts		
	Yes			Oner. Specify				

De	hte	10	1

Kim Renea Jacobs-Kennedy

Case number (# kmd

4.4 Am	nerican Express riority Creditor's Name x 0001 per Street			4, followed by 4,5, and so forth.					Total claim
Nonp Bo	riority Creditor's Name X 0001 per Street			Last 4 digits of account number	1	0	0	4	1,622.23
Numb	per Street			When was the debt incurred?	200	8	_	_	\$
LO	s Angleles	CA	90096-8000	As of the date you file, the claim	is: C	heck	all tha	at apply.	
Who	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes			Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cther. Specify Credit Card					
ţ	st Buy Credit Services			Last 4 digits of account number	5	4	7	8_	\$_4,094.97
	riority Creditor's Name PBox 78009			When was the debt incurred?	200	8		_	
Numb Pho	per Street Oenix	AZ	85062-8009	As of the date you file, the claim	ls: C	heck	all tha	at apply.	
	incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed					
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu			Type of NONPRIORITY unsecur Student loans Obligations arising out of a separ you did not report as priority clair Debts to pension or profit-sharing Other. Specify Credit Card	ation	agree			

	☐ Yes		
1.6			
	BP Visa		
	Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
	PO Box 530942		
	Number Street Atlanta	GA	30353-0942

Last 4 digits of account number $\underline{5}$ $\underline{5}$ $\underline{6}$ $\underline{6}$ 2008

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

■ Contingent Unliquidated ■ Disputed Type of NONPRIORITY unsecured claim:

Debtor 1 only

Who incurred the debt? Check one.

Debtor 2 only Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

M No ☐ Yes

M No

City

☐ Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

State

ZIP Code

8,262.68

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Jacobs-Kennedy

Case number	(if known)		

Part 2:

4.7					· · · · ·	•		E	8540	No. of Mary States
	Capital One Nonpriority Creditor's Name			Last 4 digits of account number	_		2	5	\$ `	3,880.00
	PO Box 6492			When was the debt incurred?	200)8 		_		
	Number Street Carol Stream	IL.	60197-6492	As of the date you file, the claim	is: C	heck	all th	at apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecur Student loans Obligations arising out of a separ you did not report as priority claim Debts to pension or profit-sharing Other. Specify Credit Card	ration ns	agre				
4.8	Capital One			Last 4 digits of account number	8	8	2	6_	\$	745.35
	PO Box 6492			When was the debt incurred?	200	8		_		
	Number Street Carol Stream	IL	60197-6492	As of the date you file, the claim	is: C	heck	ali th	at apply.		
	City	State	ZIP Code	Contingent						
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed☐						
	Debtor 1 only			•						
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	ed cl	aim:				
	At least one of the debtors and another			Student loans Obligations arising out of a separation	4!			A di theA		
	☐ Check if this claim is for a commu			 Obligations arising out of a separation you did not report as priority clair 		agre	emer	t or divorce that		
		mity debt		Debts to pension or profit-sharing Other. Specify Credit Card	g plan	ıs, an	d oth	er similar debts		
	is the claim subject to offset? No Yes			Other. Specify Ordan Card						
4.9	Call Tes	Mayta-Caphay Colon-Colon								869.81
	Capital One			Last 4 digits of account number	$\frac{2}{}$	3	0	2	Ψ	
	Nonpriority Creditor's Name PO Box 6492			When was the debt incurred?	200	8		-		
	Number Street Carol Stream	lL	60197-6492	As of the date you file, the claim	is: C	heck	all th	at apply.		
	City	State	ZIP Code	Contingent						
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed☐						
	Debtor 1 only			■ Disputed						
	Debtor 2 only			Type of NONPRIORITY unsecur	ed cl	aim:				
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans						
	☐ Check if this claim is for a commu			Obligations arising out of a separation you did not report as priority clair	ทร	_				
	Is the claim subject to offset?	inty debt		Debts to pension or profit-sharing Other. Specify Credit Card	g plan	s, an	d oth	er similar debts		
	✓ No Yes			Giner. Specify 515411 5474						

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case	number	(if known)	

Part 2:

4,10	Conitol One	ug artesetti e usisi		nega a sa para agus persenten este de la persona la la persona la persona la persona la persona la persona la	. 4	3	1	2	- 1930000	040.07
ب	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	 200	_	÷	-	\$ <u> </u>	,846.37		
	PO Box 71087	_		When was the debt incurred?				•		
	Number Street Charlotte	28272-1087	As of the date you file, the claim	ı is: Cl	heck	all tha	at apply.			
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communities the claim subject to offset? No Yes	ty debt	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecur Student loans Obligations arising out of a sepa you did not report as priority clair Debts to pension or profit-sharin Other. Specify Credit Card	aration a ims	agree				
4.11	Citibank Sears Mastercard Nonpriority Creditor's Name PO Box 9001055			Last 4 digits of account number When was the debt incurred?	. <u>8</u> 200	—	7_	1	<u>\$</u> 9	,071.60
	Number Street Louisville	KY	40290-1055	As of the date you file, the claim	n is: Cl	heck	all tha	at apply.		
	City	itate	ZiP Code	☑ Contingent						
	Miles incomed the debt? Cheek and			Unliquidated						
	Who incurred the debt? Check one.			☐ Disputed						
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecu	red cla	aim:				
	Debtor 1 and Debtor 2 only			**	icu di	ann.				
	At least one of the debtors and another			Student loans Obligations arising out of a sepa	ration	anno	mani	or divorce that		
	☐ Check if this claim is for a communi	h, dobt		you did not report as priority clai		agree	31116111	Or GIVOICE WILL		
		ty debt		Debts to pension or profit-sharin	ig plan:	s, and	d othe	er similar debts		
	is the claim subject to offset?			Other. Specify Credit Card				<u>_</u>		
	Mo No ☐ Yes									
4,12	wood and the control of the control						-	<u> </u>		892.77
17.0	Community Alliance Credit Unio	n		Last 4 digits of account number	, <u>2</u>	<u>L</u>	0	1	\$	
	Nonpriority Creditor's Name 39500 Highpointe Blvd.			When was the debt incurred?	201	4		-		
	Number Street Novi	MI	48375	As of the date you file, the claim	n is: C	heck	all tha	at apply.		
	City	State	ZIP Code	Contingent						
	Who incurred the debt? Check one.			Unliquidated						
	Debtor 1 only			☐ Disputed						
	Debtor 2 only	Type of NONPRIORITY unsecu	red cla	aim:						
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt			Student loans						
				Obligations arising out of a sepa		agree	emeni	or divorce that		
				you did not report as priority claims						
	is the claim subject to offset?			Debts to pension or profit-sharin Other. Specify Car Loan	iA bisu:	s, and	u OINE	a similar dedis		
	☑ No									
	☐ Yes									

Debtor	1

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Pari	2	

1,13	Dicks Sporting Goods			Last 4 digits of account number 5 4 5 9	1,282.84	
	Nonpriority Creditor's Name PO Box 960012			When was the debt incurred?	a	
	Number Street Orlando	FL	32896-0012	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	☑ Contingent		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commits the claim subject to offset?			 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card 		
	Mo □ Yes					
4.14	Discount Tires		Particular de la Particular de La Compete	Last 4 digits of account number 1 0 2 1	_{\$} _1,879.52	
	Nonpriority Creditor's Name PO Box 960061			When was the debt incurred?		
	Number Street Orlando	FL	32896-0061	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only					
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and anothe	r		Student loansObligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commi	unity debt		you did not report as priority claims		
	Is the claim subject to offset?	-		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card		
	✓ No☐ Yes					
4.15		Announce - North - Announce		Last 4 digits of account number 5 2 7 3	\$_4,493.05	
	Disney Nonpriority Creditor's Name					
	PO Box 94014 Number Street			When was the debt incurred? 2008		
	Palatine	IL	60094-4014	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	✓ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only			Time of NONDDIODITY was sweet alsies.		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	r		 □ Student loans □ Obligations arising out of a separation agreement or divorce that 		
	☐ Check if this claim is for a commi	unity debt		you did not report as priority claims		
	is the claim subject to offset?			□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify_Credit Card		
	Mo □ Yes			· · · · · · · · · · · · · · · · · · ·		

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Case number (If known)_

Part 2:

Afte	r listing any entries on this page, nu	mber the	n beginning with 4.	4, followed by 4.5, and so forth.					Total claim
4.16	Home Depot			Last 4 digits of account number	9	6	0_	<u>0</u>	6,984.36
	Nonpriority Creditor's Name PO Box 78011			When was the debt incurred?	200	8		_	Ψ
	Number Street	A 7	05000 0011	As of the date you file, the claim	is: O	:heck	all th	at anniv	
	Phoenix	AZ State	85062-8011		10. 0	, ICON	Q., G.	и ирріу.	
	City	State	ZIP Code	Contingent Unliquidated					
	Who incurred the debt? Check one.			☐ Disputed					TO A CALLED TO THE PARTY OF THE
	Debtor 1 only			Type of NONPRIORITY unsecur	od d	laim:			
	Debtor 2 only Debtor 1 and Debtor 2 only				eu c	iaiiii.			
	At least one of the debtors and another			Student loansObligations arising out of a separ	ation	agre	emen	t or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority clain	ns				
	Is the claim subject to offset?			Debts to pension or profit-sharing Other. Specify Credit Card	plar	ns, an	d oth	er similar debts	
	₩ No			a other opening					
	Yes								
		and the state of t		ara markataran kanan					
4.17	luninor			Last 4 digits of account number	6	4	2	6	_s 2,274.58
	Juniper Nonpriority Creditor's Name			•	200	_	_		Ψ
	PO Box 60517			When was the debt incurred?	_		-	_	
	Number Street City of Industry	CA	91716-0517	As of the date you file, the claim	is: C	Check	all th	at apply.	
	City	State	ZIP Code	☑ Contingent					
	Who incurred the debt? Check one.			Unliquidated					
	Debtor 1 only			Disputed					
ļ	Debtor 2 only			Type of NONPRIORITY unsecur	ed c	laim:			
· · · · · · · · · · · · · · · · · · ·	Debtor 1 and Debtor 2 only			Student loans					
	At least one of the debtors and another			Obligations arising out of a separate		agre	emer	nt or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority clair Debts to pension or profit-sharing		ns. an	d oth	er similar debts	
	is the claim subject to offset?			Other. Specify Credit Card					
	₩ No								
	☐ Yes								
4./3		***********				~~~	<u></u> А		s 2,265.12
۲	Kroger			Last 4 digits of account number	_	3	4		·
	Nonpriority Creditor's Name P.O. Box 790408			When was the debt incurred?	200	D8		_	
	Number Street St. Louis	МО	63179-0408	As of the date you file, the claim	is: (Check	all th	nat apply.	
	City	State	ZIP Code	Contingent					
	Who incurred the debt? Check one.			Unliquidated					
	Debtor 1 only			☐ Disputed					
	Debtor 2 only			Type of NONPRIORITY unsecui	red c	:laim:	:		
	Debtor 1 and Debtor 2 only			Student loans					
	At least one of the debtors and another	r		Obligations arising out of a sepa		n agre	eme	nt or divorce that	
	Check if this claim is for a commu	inity debt		you did not report as priority clain Debts to pension or profit-sharing		ns. ar	nd oth	er similar debts	
	Is the claim subject to offset?			Other. Specify Credit Card	عام و				
	☑ No								
	Yes								

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Case number (If known)		

ır listing any entries on this page, ກເ	ımber the	m beginning with 4,	4, followed by 4.5, and so forth.					≀То	tat claim
Loveloft			Last 4 digits of account number	6	0	4	0	S	945.49
Nonpriority Creditor's Name PO Box 659569			When was the debt incurred?	200)8		_	7	
Number Street San Antonio	TX	78265-9569	As of the date you file, the claim	is: C	heck	all th	at apply.		
City Who Incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed						Houghpurist stade grant programme scrope age
			Type of NONPRIORITY unsecur Student loans Obligations arising out of a separation you did not report as priority clair	ration	agre	emer			
is the claim subject to offset? No Yes			☑ Other Specify Credit Gard					-turutud-rota	
Lord & Taylor			Last 4 digits of account number	_	_	8	. 4	\$ ¹	,453.74
PO Box 4144			When was the debt incurred?	200)8		_		
Carol Stream	IL	60197-4144	As of the date you file, the claim	is: C	heck	all th	nat apply.		
Check if this claim is for a commuls the claim subject to offset? No Yes		ZIP Code	Student loans Obligations arising out of a separ you did not report as priority clair Debts to pension or profit-sharing	ration ms	agre	emer			
Macy's			Last 4 digits of account number	_7	9	6	. 2	\$	5,006.02
Nonpriority Creditor's Name PO Box 9001094			When was the debt incurred?	200)8 ——		_		
Number Street LOUISVIIIe City	KY State	40290-1094 ZIP Code	Contingent	is: (Check	: all th	nat apply.		
_			 Student loans Obligations arising out of a separation you did not report as priority clair Debts to pension or profit-sharing 	ration ms	agre	emer			
	Loveloft Nonpriority Creditor's Name PO Box 659569 Number Street San Antonio City Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communis the claim subject to offset? No Yes Lord & Taylor Nonpriority Creditor's Name PO Box 2124 Number Street Carol Stream City Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communis the claim subject to offset? No Yes Macy's Nonpriority Creditor's Name PO Box 9001094 Number Street Louisville City Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another City Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communis the claim subject to offset?	Loveloft Nonpriority Creditor's Name PO Box 659569 Number Street San Antonio TX City State Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Lord & Taylor Nonpriority Creditor's Name PO Box 4144 Number Street Carol Stream IL City State Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Macy's Nonpriority Creditor's Name PO Box 9001094 Number Street Louisville KY City State Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only City State Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No	Loveloft Nonpriority Creditor's Name PO Box 659569 Number Street San Antonio TX 78265-9569 City State ZiP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Lord & Taylor Nonpriority Creditor's Name PO Box 41244 Number Street Carol Stream IL 60197-4144 City State ZiP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Macy's Nonpriority Creditor's Name PO Box 9001094 Number Street Louisville KY 40290-1094 City State ZiP Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Nonpriority Creditor's Name PO BOX 659569	Loveloft Nonpriority Creditor's Name PO Box 659569 Number Signet San Antoniol TX 78265-9569 Whon was the debt incurred? As of the date you file, the claim is: Contingent Uniquidated Disputed Type of NONPRIORITY unsecured of Student loans City Student loans Check if this claim is for a community debt Is the claim subject to offset? Who incurred the debt? Check one. City Contingent Uniquidated Disputed Type of NONPRIORITY unsecured of Student loans Collegations arising out of a separation you did not report as priority claims Debts to pension or profit seeing plan Carlo Stream Louis Stream Louis Stream Louis Stream Louis Stream As of the date you file, the claim is: Contingent Uniquidated Disputed Type of NONPRIORITY unsecured of Student loans Collegations arising out of a separation you did not report as priority claims Debts to pension or profit seeing plan Carlo Stream Last 4 digits of account number Student loans Collegations arising out of a separation you do not report as priority claims Debts to pension or profit seeing plan Carlo Stream Last 4 digits of account number Student loans Collegations arising out of a separation you do not report as priority claims Debts to pension or profit seeing plan Carlo Stream Last 4 digits of account number Student loans Contingent Uniquidated Disputed As of the date you file, the claim is: Contingent Uniquidated Disputed Type of NONPRIORITY unsecured or Student loans Collegations arising out of a separation you do not report as priority claims plan Contingent C	Loveloft Nospetraty Corditor's Name PO Box 659569 Number Street San Antonio TX 78265-9569 When was the debt incurred? As of the date you file, the claim is: Check City State ZP Code Who Incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtons and another City Check if this claim is for a community debt Is the claim subject to offset? Men was the debt incurred? As of the date you file, the claim is: Check Contingent Unliquidated Disputed Type of NONPRIORITY unsecured dalm: Student loans Collegations arising out of a separation agrey you did not report as printly dalms Debtor 2 only Cother: Specify Code Carlo Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Cother 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtons and another Check if this claim is for a community debt Is the claim subject to offset? Men was the debt incurred? As of the date you file, the claim is: Check Carlo Stream Last 4 digits of account number Type of NONPRIORITY unsecured dalm: Cother Specify Code Carlo Cother Specify Code Carlo Cother Specify Code Carlo Cother Specify Code Carlo Cother Specify Cother S	Loveloft Norpinory Creditor's Name PO Box 659569 Number Signet Si	Loveloft Nonprotein/Condition's Name PO Box 659569 Standard TX 78265-9569 Standard TX 7	Last 4 digits of account number 6 0 4 0 2008

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Case number (if known)_____

Part 2:

					Total claim
After	listing any entries on this page, nu	mber thei	n beginning with 4.	i, тоноwed by 4.5, and so тогит.	ruaruann
4,22	Macy's American Express			Last 4 digits of account number 7 1 0 0	621.57
	Nonpriority Creditor's Name PO Box 9001108			When was the debt incurred?	
	Number Street Lousiville	KY	40290-1108	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commu Is the claim subject to offset? ☑ No ☐ Yes	inity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.23	Midas			Last 4 digits of account number 2 2 5 2	729.88
	Nonpriority Creditor's Name PO Box 960061			When was the debt incurred?	
	Number Street Orlando	FL	32986-0061	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	State	ZIP Code	☑ Contingent☑ Unliquidated☑ Disputed	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and anothe			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes	unity debt		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	
4,24	PNC Bank			Last 4 digits of account number 1 0 3 2	s <u>19,778.80</u>
	Nonpriority Creditor's Name PO Box 856177			When was the debt incurred?	
	Number Street Louisville	KY	40285-6177	As of the date you file, the claim is: Check all that apply.	
Application of the second	City Who incurred the debt? Check one.	State	ZiP Code	☑ Contingent☑ Unliquidated☑ Disputed	
al ever see con-tailed des coppes, for garant debade to the	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	er		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
and the first of the control of the	☐ Check if this claim is for a comm Is the claim subject to offset? ☑ No ☐ Yes	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

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Case number (if known)	
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Afte	r listing any entries on this page, nu	ımber the	m beginning with 4.4	4, followed by 4.5, and so forth.					Tot	al claim
4,25	Sam's Club			Last 4 digits of account number	2	3_	8	<u> </u>	_{\$_} 5	,515.30
	Nonpriority Creditor's Name PO Box 960013		en e	When was the debt incurred?	200	8		-		
	Number Street Orlando	FL	32896-0013	As of the date you file, the claim	is: C	heck	all th	nat apply.		
	City	State	ZIP Code	Contingent						
	Who incurred the debt? Check one.			Unliquidated						
	Debtor 1 only			☐ Disputed						
	Debtor 2 only			Type of NONPRIORITY unsecu	red cl	laim:				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe	_		Student loans						
	☐ Check if this claim is for a commu			Obligations arising out of a sepa you did not report as priority claim	ms					1
	Is the claim subject to offset?			Debts to pension or profit-sharing Credit Card	g pian I	is, an	a otn	ier similar debts		
	☑ No									170
	Yes									app
14.24		20-20-2417-08-Fire-04	en e	verfaglig tiv den tig gjordformer en den en transe vere den anterior for helde vil statement van rende anterior	*****				9 0.444744	
4,26	Sears			Last 4 digits of account number		<u>5</u>	1	<u> </u>	s_1	,821.50
	Nonpriority Creditor's Name PO Box 78051			When was the debt incurred?	200	8		_		
	Number Street Phoenix	AZ	85062-8051	As of the date you file, the claim	is: C	Check	all ti	nat apply.		
	City	State	ZiP Code	Contingent						
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed☐						
	☑ Debtor 1 only			•						
	Debtor 2 only			Type of NONPRIORITY unsecu	red c	laim	:			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	er		Student toansObligations arising out of a sepa	eration	agre	eme	nt or divorce that		
	Check if this claim is for a commi	unity debt		you did not report as priority clai	ms					
	Is the claim subject to offset?	-		Debts to pension or profit-sharin Other. Specify Credit Card	ig plar	ns, ar	nd oti	ner similar debts		
	☑ No									
	☐ Yes									
4,27		and the state of the state of the state of	and the second of the second o	generalist timbre de der bestember stegt en periode over betreet viden v	THY AS	· · · ·	2	SN A SA	\$,832.33
	PNC Bank Nonpriority Creditor's Name			Last 4 digits of account number			<u>့ ပ</u>			
	PO Box 747032			When was the debt incurred?	200	J3 		_		
	Number Street Pittsburgh	PA	15274-7032	As of the date you file, the clain	n is: (Chec	k all t	hat apply.		
	City	State	ZIP Code	☑ Contingent☑ Unliquidated						
	Who incurred the debt? Check one.			Disputed						
	Debtor 1 only			·		.1-:	_			
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	irea c	mısı				
	At least one of the debtors and another	er		Student loansObligations arising out of a sept	aration	n agn	eeme	ent or divorce that		
	☐ Check if this claim is for a comm	unity debt		you did not report as priority cla	ims	_				
	Is the claim subject to offset?			Debts to pension or profit-sharing Other. Specify Bank over the Debts to pension or profit-sharing Bank over the Debts to pension or pension o	faft	pro	tec	tion		
	☑ No			· - 						
	☐ Yes									

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Renea Case number (If known)

Part 2:			-
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Afte	r listing any entries on this page, nu	mber the	m beginning with 4.4	, followed by 4.5, and so forth.					Tol	tal claim		
1.28	Westgate Resorts			Last 4 digits of account number	_		2	1_	ş <u>11</u>	,379.17		
	Nonpriority Creditor's Name PO Box 659617			When was the debt incurred?	200	80		_				
	Number Street San Antonio	TX	78265-9617	As of the date you file, the claim	is: (Checl	call th	at apply.				
	City	State	ZIP Code	Contingent Unliquidated								
	Who incurred the debt? Check one. Debtor 1 only			Disputed								
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a communication.			Type of NONPRIORITY unsecur Student loans Obligations arising out of a separation you did not report as priority clair	ration ms	n agn	eemer					
	is the claim subject to offset? Ves	mey don't		Debts to pension or profit-sharing Other. Specify Credit Card	g pla	ns, a	nd oth	er similar debts				
4.29	Kohl's	nigolig di Silon di S		Last 4 digits of account number			1	1	\$	575.26		
	Nonpriority Creditor's Name PO Box 2983			When was the debt incurred?	20	80	<u>-</u> .	_				
	Number Street Milwaukee	WI	53201-2983	As of the date you file, the claim	is:	Chec	k all th	nat apply.				
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecur Student loans Obligations arising out of a sepa	ratio			nt or divorce that				
	Check if this claim is for a commu	nity debt		you did not report as priority clair Debts to pension or profit-sharin Other. Specify Credit Card	a pla	ans, a	nd oth	ner similar debts				
	is the claim subject to offset? ☑ No ☐ Yes			Ciner. Specify								
Y.30	Beaumont Hospitals Nonpriority Creditor's Name			Last 4 digits of account number			<u>0</u> /201	- —	\$	135.00		
	750 Stephenson Highway			When was the debt incurred?	_	120	201	'				
	Number Street Troy	MI	48007-5042	As of the date you file, the claim	n is:	Chec	k all t	hat apply.				
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed								
	 ☑ Debtor 1 only ☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another 	r		Type of NONPRIORITY unsecu	aratio			ent or divorce that				
	☐ Check if this claim is for a commuls the claim subject to offset? ☐ No ☐ Yes	ınity debt		you did not report as priority cla Debts to pension or profit-sharin Other. Specify Medical Bil	ims na ok							

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Case number	(I KIOWII)	 	

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation F	'aį	ge
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Afte	r listing an	y entries on this page, n	umber the	n beginning with 4.	.4, followe	d by 4.5, and so	o forth.					Tota	d claim
L3i	(#2000 LC) N 9 3 11	nt Hospitals			Last 4	digits of account	t number	2	1	1 2	<u>-</u>	\$ <u></u>	368.82
	Nonpriority Cre 750 Step	oditor's Name Ohenson Highway			When	was the debt inc	urred?	10/2	20/20)17 ——			and an indicate of a forest
	Number Troy	Street	MI	48007-5042	As of t	he date you file,	the claim	is: Cr	eck a	il that	apply.		an dispersion of the second
	City		State	ZIP Code		ntingent liquidated							***************************************
	_	red the debt? Check one.			Dis Dis	puted							
	_	•	er		Stu Ob	of NONPRIORITY Ident loans ligations arising out u did not report as p	t of a sepa	ration :		ment (or divorce that		e e e e e e e e e e e e e e e e e e e
	☐ Check i	if this claim is for a comm	unity debt		☐ De	bts to pension or p			s, and	other	similar debts		•
		n subject to offset?			☑ Otl	ner. SpecifyIVIEC	icai biii						
	No Yes				and Market Assess and Control	soAnnadonutzviznoscondva Alvatralitydnimikka							
432		ont Health			Last 4	digits of accoun	t number	_	4	4	7	\$	336.28
	PO Box	554878			When	was the debt inc	urred?	200	8				er, ment amount
	Number Detroit	Street	MI	48255	As of t	the date you file,	the claim	is: C	heck a	all that	apply.		
	City Who incur Debtor 1	red the debt? Check one.	State	ZIP Code	un Un	ntingent iliquidated sputed							
	Debtor 2	•			Туре	of NONPRIORIT	Y unsecu	red cl	aim:				
		1 and Debtor 2 only				udent loans							
		one of the debtors and anothe				oligations arising ou u did not report as			agree	ment	or divorce that		
		if this claim is for a comm	unity debt			ebts to pension or phere. Specify Med			s, and	othe	r similar debts		
	is the clair	n subject to offset?			₩ Ot	her. Specify	alcai Dii						
	Yes												
4,33	Hospital	Consultants, P.C.			Last 4	digits of accour	ıt numbei	, 9	6	1	0_	\$ <u> </u>	,133.77
		reditor's Name Omentum Place	,		When	was the debt inc	urred?	02/2	26/2	018			
	Number Chicago	Street	IL	60689-5334	As of	the date you file,	, the clain	n is: C	heck	ail tha	t apply.		
	City		State	ZIP Code	_	ontingent niquidated							
	_	rred the debt? Check one.			☐ Di	sputed							
	Debtor	¥			Type	of NONPRIORIT	Y unsecu	ıred cl	aim:				
		1 and Debtor 2 only			• •	udent loans							
	At least	one of the debtors and anoth	er		☐ o	bligations arising or			agree	ement	or divorce that		
	☐ Check	if this claim is for a comm	nunity debt		□ D	ou did not report as obts to pension or p	rofit-sharir	na plan	s, and	d othe	r similar debts		
		m subject to offset?			2 0	ther. Specify Ne	aical Bil				2000		
	☑ No ☐ Yes												

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Jacobs-Kennedy

Case number (f known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

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4.34	M:I ₁ N ₂ D;			Last 4 digits of account number	7	8	6	9	\$	145.84
	Nonpriority Creditor's Name 28595 Orchard Lake Rd, Ste.	200	The second secon	When was the debt incurred?	10/	21/2	2017	7 -		
	Number Street Farmington Hills	MI	48334-2979	As of the date you file, the claim	is: C	heck	all th	at apply.		
	City	State	ZIP Code	Contingent Unliquidated						
	Who incurred the debt? Check one.			Disputed						
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecur	ed cl	aim:				
	Debtor 1 and Debtor 2 only			Student loans						
	At least one of the debtors and another			Obligations arising out of a separage you did not report as priority clair		agre	emer	nt or divorce that		
	Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing		s, ar	d oth	er similar debts		
	is the claim subject to offset?			Other. Specify IVIEUICAL BIII						
	Yes									
Y, 35	Botsford Hospital Emergeny	**************************************		Last 4 digits of account number	2	1	0	8_	\$	135.00
	Nonpriority Creditor's Name			When was the debt incurred?	10/	19/2	2017	7		
	28050 Grand River Ave. Number Street							-		
	Farmington Hills	MI	48336	As of the date you file, the claim	is: C	heck	all th	at apply.		
	City	State	ZIP Code	Contingent Unliquidated						
	Who incurred the debt? Check one.			☐ Disputed						
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecur	ed cl	laim				
	Debtor 1 and Debtor 2 only			Student loans	00 0		•			
	At least one of the debtors and another	•		Obligations arising out of a separ		agre	emer	nt or divorce that		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority clair Debts to pension or profit-sharing		ıs. ar	nd oth	er similar debts		
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing ☐ Other. Specify Medical Bill		,				
	☑ No □ Yes									
4,36	Beaumont	Annen den de la lace	nderformer werde en deutsche von der der deutsche der der der der der der der der der de	Last 4 digits of account number	_2	1	1	3_	\$	336.28
	Nonpriority Creditor's Name 3601 W 13 Mile Rd			When was the debt incurred?	10/	25/2	2017	7 -		
	Number Street Royal Oak	MI	48073	As of the date you file, the claim	is: C	heck	all th	at apply.		
	City	State	ZiP Code	Contingent						
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed☐						
	Debtor 1 only									
	Debtor 2 only			Type of NONPRIORITY unsecur	red c	laim	;			
	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another			Student loansObligations arising out of a separ	ration	0000	oma-	nt or discrea that		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority clair	ms	-				
	Is the claim subject to offset?	•		Debts to pension or profit-sharing Other. Specify Medical Bill	g plan	ıs, ar	id oth	er similar debts		
	☑ No ☐ Yes									

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Fedloan Servicing			Last 4 digits of account number 8 2 9 9	1,329
Nonpriority Creditor's Name PO Box 530210			When was the debt incurred? 01/30/2012	
Number Street Atlanta	GA	30353	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim is for the claim subject to offset No Yes	nd another a community debt	ZIP Code	 ☑ Contingent ☑ Unliquidated ☑ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☑ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☑ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify 	
Lincoln Automotive Fir	nancial Services	s, Dept. 194101	Last 4 digits of account number $\frac{1}{2016}$ $\frac{7}{2016}$ $\frac{1}{300}$ $\frac{1}{300}$	7,56
Number Street Detroit	MI	48255	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che	State	ZIP Code	Contingent Unliquidated Disputed	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim is for the claim subject to offset Mo Yes	a community debt		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cther. Specify Lease	
Chrysler Capital			Last 4 digits of account number 5 3 9 8	4,75
Nonpriority Creditor's Name PO Box 660647			When was the debt incurred?	
Number Street Dallas	TX	75266	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Che	State ck one.	ZIP Code	☑ Contingent☑ Unliquidated☑ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors a ☐ Check if this claim is for is the claim subject to offset ☐ No	a community debt		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Lease	

Kim Renea Jacobs-Kennedy

Case number (if known)	
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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Allied Business Services			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1799			Line 4.30 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number 0 4 7 8
Holland	MI	49422	Last 4 digits of account number
ity annices accretical control control and control control control control control control control control control	State	ZIP Code	
Allied Business Services			On which entry in Part 1 or Part 2 did you list the original creditor?
eme PO Box 1799			Line 4.35 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Holland	MI	49422	Last 4 digits of account number 0 4 7 9
ty	State	ZIP Code	
Allied Business Services			On which entry in Part 1 or Part 2 did you list the original creditor?
eme			Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims
PO Box 1799			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
umber Street			Claims Part 2: Creditors with Nonpriority Unsecured
Holland	MI	49422	6 3 5 2
ity	State	ZIP Code	Last 4 digits of account number 6 3 5 2
Alltran Financial, LP	CONTRACTOR OF CO	Company of the company of the company of	On which entry in Part 1 or Part 2 did you list the original creditor?
ame			
			Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims
rumber Street PO Box 610			Part 2: Creditors with Nonpriority Unsecured Claims
Sauk Rapids	MN	56379	
ity	State	ZtP Code	Last 4 digits of account number 0 9 2 5
Alltran Financial, LP	· ************************************	ankurcise (ijob bjergalladagus) saadiselanische Edistise Ernbreds Abende	On which entry in Part 1 or Part 2 did you list the original creditor?
ame			
PO Box 610			Line $\frac{4.9}{}$ of (Check one): \Box Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Sauk Rapids	MN	56379	Last 4 digits of account number 0 8 6 9
ity NCB Management Service	State es Inc	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame			On which entry in Part 1 of Part 2 did you list the original creditor r
PO Box 1099			Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
lumber Street			☑ Part 2: Creditors with Nonpriority Unsecured
			Claims
Langhorne	PA	19047	Last 4 digits of account number 7 0 9 0
Client Services Inc	State	ZIP Code	
Client Services, Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
3451 Harry S. Truman Bl	v d		Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Priority Unsecured
		· ·	Claims
St. Charles	МО	63301	Last 4 digits of account number 7 2 6 7
City	State	ZIP Code	Labi → uiyilb di account number (2008) 2008 2008 2008

Filed 09/26/18 Entered 09/26/18 13:51:06 Schedule E/F: Creditors Who Have Unsecured Claims

Kim

Renea

Jacobs-Kennedy

Case number	(if known)	
	e	

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Client Services Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 3451 Harry S. Trumai	n Blvd		Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
			7 8 9 1
St. Charles	MO	63301	Last 4 digits of account number 7 8 9 1
City The surface of the control of t	State	ZiP Code	
ERC			On which entry in Part 1 or Part 2 did you list the original creditor?
lame PO Box 23870			Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Jacksonville	FL	32241	Last 4 digits of account number 7 8 3 1
ity	State	ZIP Code	Last 4 digits of account number
First Source Advanta	ge, LLC		On which entry in Part 1 or Part 2 did you list the original creditor?
lame			
PO Box 628			Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Buffalo	NY	14240	
City	State	ZIP Code	Last 4 digits of account number 0 5 5 0
First Source Advanta	and the second s	<u> </u>	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	<u>- : </u>		
PO Box 628			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Buffalo	NY	14240	
Dunaio	State	ZIP Code	Last 4 digits of account number 3 6 6 9
Global Credit Collecti	ment of the section o		
lame		 	On which entry in Part 1 or Part 2 did you list the original creditor?
5440 N. Cumberland	Ave., Ste. 30	0	Line 4.6 of (Check one): \square Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
<u></u>			Claims
Chicago	IL.	60656	Last 4 digits of account number 9 7 6 0
ity Midland Credit Mana	State nement inc	ZIP Code	
Vame	901110111, 1110.		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 60578			Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Los Angeles	CA	90060	Last 4 digits of account number 3 2 8 6
City	State	ZIP Code	
Midland Credit Manag	gement, Inc.		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 60578			Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Los Angeles	CA	90060	Last 4 digits of account number 1 5 1 1
City	State	ZIP Code	Last 4 digits of account number

Kim Renea

Jacobs-Kennedy

Case number (# known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Midland Credit Manage	ement, Inc.		ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
Name			·
PO Box 60578			Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Cla
Los Angeles	CA	90060	Last 4 digits of account number 5 5 5 4
City	State	ZIP Code	
Midland Credit Manage	ement, Inc.		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			4.5
PO Box 51319			Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Aulibei Stieet			Part 2: Creditors with Nonpriority Unsecured Claims
Los Angeles	CA	90051	
City City	State	ZIP Code	Last 4 digits of account number 7 9 1 3
Radius Global Solution			Our which was to Bout 4 at B. 10 th to the state of the s
Vame			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 390905			Line 4.21 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Minneapolis	MN	55439	Last 4 digits of account number 5 5 7 0
Dity Commence of the commence	State	ZIP Code	
Portfolio Recovery Ass	sociates, LLC		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			4 25
PO Box 12914			Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk	VA	23541	
City	State	ZIP Code	Last 4 digits of account number 2 3 8 0
RMP Services	Directive and the second section of the contract of the contra	Activities of complete control of the control of th	
Vame			On which entry in Part 1 or Part 2 did you list the original creditor?
8155 Executive Court,	Ste. 10		Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Lansing	MI	48917	Last 4 digits of account number 6 3 7 5
Dity	State	ZIP Code	
Weber & Olcese, PLC			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 1330		_	130 4.7 of (Observed) D Bod (Condition with District Heavest Condition
Number Street			Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
rumbi Gudot			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Birmingham	MI	48012	
City	State	ZIP Code	Last 4 digits of account number 3 7 5 9
Convergent Outsourcin			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 9004			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Renton	WA	98057	Last 4 digits of account number 8 9 8 0
City	State	ZIP Code	Legs 7 Vivile VI Golovini Hülliböl

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.
- **Total claims** from Part 2
- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- Total claim
- 6a.
- 6b.
- 6c
- 6e. 0.00

Total claim

- 6f.

1,329.52

- 6g.
- 6h.
- 138,163.76
- 6j. 139,493.28

Debtor	Kim	Renea	Jacobs-Kenne
Dobtoi	First Name	Middle Name	Last Name
Debtor 2			
(Spouse If filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the: Eastern District of M	fichigan

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with	n whom you	have the contract or	lease	State what the contract or lease is for
2.1	Chrysler	Capital				2016 Dodge Charger
	Name PO Box 6	660647				•
	Number Dallas	Street	TX	75266		
	City		State	ZIP Code		•
2.2	Ally					2017 Jeep Patriot
	Name PO Box 3	380902				•
	Number Blooming	Street Iton	MN	55432-0902		•
2.3	City		State	ZIP Code	er van de de	The first of the second of
	Name					
	Number	Street				
	City	es sur sur	State	ZIP Code	e e e	
2.4						
	Name				1 41114	
	Number	Street				
2.5	City		State	ZIP Code		
	Name					
	Number	Street				

ZIP Code

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Official Form 106G Schedule G: Executory Contracts and Unexpired Leases page 1 of 1

Fill in this	s information to ide	ntify your case:		
	Kim	Renea	Jacobs-Kenned	V
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if fil	ling) First Name	Middle Name	Lasi Name	
United Stat	es Bankruptcy Court for	the: Eastern District of Mic	higan	
Case numb	per			
(If known)	· - ·			☐ Check if this is an
	. =			amended filing
Official	Form 106F	<u>1_</u>		
Sche	dule H: Yo	ur Codebtor	S	12/15
are filing to and numbe case numb 1. Do you 1. No Ye 2. Within Arizon Ye	ogether, both are eger the entries in the ler (if known). Answer (if known). Answer (if known). Answer (if known). Answer (if known). So the last 8 years, has, California, Idaho, last. Did your spouse, for No	jually responsible for sup boxes on the left. Attach rer every question. rs? (If you are filing a joint ave you lived in a commu Louisiana, Nevada, New M	plying correct information. If the Additional Page to this pa- case, do not list either spouse a mity property state or territory lexico, Puerto Rico, Texas, Was sivalent live with you at the time	? (Community property states and territories include shington, and Wisconsin.)
	Number Street			-
	City	State	ZIP Code	-
showr Sched Sched	n in line 2 again as a Iule D (Official Form	a codebtor only if that pe n 106D), Schedule E/F (Of le G to fill out Column 2.	rson is a guarantor or cosign	or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				Oneon all solieuties that apply.
Name		1일(1)(2명) 함께 (12) (12) (12) (12) (12) (12)		Schedule D, line
Numt	per Street			Schedule E/F, line
		·		
3.2 City	<u>.</u>	State	ZIP Code	and the second of the second o
Name	•			Schedule D, line
At. post	nor Sheet			Schedule E/F, line
Numb	per Street			☐ Schedule G, line
City		State	ZIP Code	···········
3.3				Schedule D, line
Name	3			☐ Schedule E/F, line
Numb	per Street			☐ Schedule G, line
City		State	ZIP Code	

Page 45 of 70 page 1 of 1 Filed 09/26/18 Entered 09/26/18 13:51:06
Schedule H: Your Codebtors 18-53127-mlo Official Form 106H Doc 1

Fill in this i	information to identify	your case:				
Debtor 1	Kim	Renea	Jacobs-Keni	nedy		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	Eastern District of Michiga	an			
Case number	r		•		Check if t	this is:
(ii kilowii)					🔲 An am	nended filing
Official E	· · · · · · · · · · · · · · · · · · ·					plement showing postpetition chapter 13 e as of the following date:
	orm 106I	. <u>.</u>			MM / E	DD / YYYY
Sche	dule I: You	ır Income				12/15
Part 1:	parated and your spou eet to this form. On the Describe Employm	use is not filing with you top of any additional pa	, do not include in	formation a	about vour spo	you, include information about your spous ouse. If more space is needed, attach a known). Answer every question.
1. Fill in you informati	ur employment ion.		Debtor 1			Debtor 2 or non-filing spouse
attach a s	re more than one job, separate page with on about additional s.	Employment status	Employed Not employ	yed .		☐ Employed ☐ Not employed
self-emplo	art-time, seasonal, or oyed work.	Occupation	Phlebotomis	t		
	on may include student naker, if it applies.	Employer's name	Beaumont H	lospital		
		Employer's address	3601 W. 13 i	Mile	<u>-</u>	
			Number Street			Number Street
			Royal Oak	Mi	48073	
			City		IP Code	City State ZIP Code
		How long employed the	·	-		
Part 2:	Give Details About	Monthly Income				
Estimate	monthly income as of	the date you file this for	m. If you have noth	ing to repor	t for any line, w	rite \$0 in the space. Include your non-filing
If you or y	nless you are separated our non-filing spouse ha ou need more space, a		er, combine the infi his form.	ormation for	all employers f	or that person on the lines
				F	or Debtor 1	For Debtor 2 or non-filing spouse
		ary, and commissions (b calculate what the monthi		2.	4,366.76	\$
3. Estimate	and list monthly over	time pay.		3. +\$_	311.88	+ \$
4. Calculate	e gross income. Add lii	ne 2 + line 3.		4. \$_4	4,678.64	\$0.00

Dehtor	1

Jacobs-Kennedy Kim Renea

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	s 4,678.64	s 0.00	
5. List all payroll deductions:		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
• • • • • • • • • • • • • • • • • • • •	_	e 611.12		
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans	5a.	Ψ	\$	
5c. Voluntary contributions for retirement plans	5b.	\$	\$	
5d. Required repayments of retirement fund loans	5c. 5d.	5	\$	
5e. Insurance	5u. 5e.	\$ • 169.20	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues		\$	\$	
5h. Other deductions. Specify:	5g. 5h.	+\$	*	
		780.32	т \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	1. 6.	a	\$0.00_	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>3,898.32</u>	\$	
8. List all other income regularly received:				
 Net income from rental property and from operating a business, profession, or farm 				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	lent	·		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8 e .	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistat that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ince			
Specify:	8f.	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00_	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_3,898.32	\$=	\$0.00
11. State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.	your de	ependents, your room		
Do not include any amounts already included in lines 2-10 or amounts that are	not av	ailable to pay expense	es listed in Schedule J.	
Specify:			_ 11. 🛨	\$
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S	e result S <i>tatistic</i>	is the combined mont cal Information, if it ap	plies 12.	\$3,898.32 Combined
13. Do you expect an increase or decrease within the year after you file this ☐ No. ☐ Yes. Explain: Overtime varies.	form?		-	monthly income

Fill in this information to identify your case:				
Debtor 1 Kim Renea Jacobs-Ke	ennedy			
First Name Middle Name	Last Name	Check if this	is:	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	An amen	•	
United States Bankruptcy Court for the: Eastern District of Michig	gan		ment showing post as of the following	petition chapter 13
Case number (if known)		MM / DD /	<u> </u>	,
Official Form 106J	-			
Schedule J: Your Expense	es			12/15
Be as complete and accurate as possible. If two married prinformation. If more space is needed, attach another sheet (if known). Answer every question.	people are filing toget at to this form. On the	her, both are equally res top of any additional pa	ponsible for supply ges, write your nam	ing correct e and case number
Part 1: Describe Your Household				
1. Is this a joint case?				
No. Go to line 2.Yes. Does Debtor 2 live in a separate household?				
☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, E	Expenses for Separate I	Household of Debtor 2.		
2. Do you have dependents?		· · · · · · · · · · · · · · · · · · ·		
Do not list Debtor 1 and Yes. Fill out this in each dependent	formation for Debtor	ent's relationship to I or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	Grand	dchild	18	☐ No ☑ Yes
	Grand	Ichild	18	□ No ☑ Yes
	Grand	lchild	19	□ No ☑ Yes
				□ No
				☐ Yes
		-		□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				
yourself and your dependents?				
Part 2: Estimate Your Ongoing Monthly Expense)S			
Estimate your expenses as of your bankruptcy filing date expenses as of a date after the bankruptcy is filed. If this i applicable date.				
Include expenses paid for with non-cash government assi	istance if you know th	e value of		
such assistance and have included it on Schedule I: Your			Your expe	nses
 The rental or home ownership expenses for your residence any rent for the ground or lot. 	ence. Include first mort	gage payments and	4. \$	1,700.00
If not included in line 4:				•
4a. Real estate taxes			4a. \$	0
4b. Property, homeowner's, or renter's insurance			4b. \$	0
4c. Home maintenance, repair, and upkeep expenses			4c. \$	0
4d. Homeowner's association or condominium dues			4d. \$	

Kim

Renea

Jacobs-Kennedy

Case number (if known)

			Your expen	ses
5.	Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	330.43
	6b. Water, sewer, garbage collection	6b.	\$	249.00
	6c. Telephone, cell phone, internet, satellite, and cable services	6c.	\$	162.50
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	500.00
8.	Childcare and children's education costs	8.	\$	
9.	Clothing, laundry, and dry cleaning	9.	\$	15.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	
12.			œ	250.00
	Do not include car payments.	12.	Ψ	100.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Charitable contributions and religious donations	14.	\$	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15 b .	\$	
	15c. Vehicle insurance	15c.	\$	401.63
	15d. Other insurance. Specify:	15d.	\$	
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	396.33
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	· · · · · · · · · · · · · · · · · · ·
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
9.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e.	\$	

Case number (if known) Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 4,154.89 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 4,154.89 23. Calculate your monthly net income. 3.898.32 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a 23b. Copy your monthly expenses from line 22c above. 4,154.89 23b 23c. Subtract your monthly expenses from your monthly income. -256.57 The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

Jacobs-Kennedy

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

M No.

☐ Yes. Explain here:

Kim

Debtor 1

Renea

First Name Middle Name Last Name
oouse, if filing) First Name Middle Name Last Name
nited States Bankruptcy Court for the: Eastern District of Michigan

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT at	n attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	. Attach Benkruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Inder penalty of perjury, I declare that I have read the	he summary and schedules filed with this declaration and
hat they are true and correct.	
	4.
hill	×
Signature of Debtor 1	Signature of Debtor 2
09/26/2018	
09/20/2010	
Date MM / DD / YYYY	Date

Debtor 1 Kim Renea Pirst Name M	Jacobs-Kennedy		
Debtor 2	iddle Name Last Name		
	liddle Name Last Name		
Inited States Bankruptcy Court for the: Easte	ern District of Michigan		
ase number	 		Check if this is an
f known)			amended filing
fficial Form 107			
		viduals Filing for Bankruptcy	
as complete and accurate as possib	le. If two married people are filir	ng together, both are equally responsible for supplyi orm. On the top of any additional pages, write your n	ng correct ame and case
mber (if known). Answer every quest	ion.		
Part 1: Give Details About You	r Marital Status and Where `	You Lived Before	
. What is your current marital status	?		
Married			
Not married			
2. During the last 3 years, have you li	ved anywhere other than where	you live now?	
☑ No	ad in the land O common. Do not include	do whore you live new	
Yes. List all of the places you live			Dates Debtor 2
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	lived there
		☐ Same as Debtor 1	
			☐ Same as Debtor
	From		Same as Debtor
Number Street	From To	Number Street	
Number Street	110111	Number Street	From
	To	Number Street City State ZIP Code	From
	110111	City State ZIP Code	From To
	Tote ZIP Code		From To
	te ZIP Code From	City State ZIP Code	From To
City Stat	Tote ZIP Code	City State ZIP Code	From To Same as Debtor
City Stat	te ZIP Code From To	City State ZIP Code Same as Debtor 1 Number Street	From To Same as Debtor
City Stat	te ZIP Code From	City State ZIP Code	To Same as Debtor
City State Number Street City State Cit	te ZIP Code From To	City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	From To Same as Debtor From To (Community property
City State Number Street City States States and territories include Arizona	te ZIP Code From To	City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	From To Same as Debtor From To (Community property
Number Street City State	To te ZIP Code To To ate ZIP Code ver live with a spouse or legal eq a, California, Idaho, Louisiana, Net	City State ZIP Code Number Street City State ZIP Code State ZIP Code City State ZIP Code Quivalent in a community property state or territory?	From To Same as Debtor From To (Community property
Number Street City States City States and territories include Arizona No	To te ZIP Code To To ate ZIP Code ver live with a spouse or legal eq a, California, Idaho, Louisiana, Net	City State ZIP Code Number Street City State ZIP Code State ZIP Code City State ZIP Code Quivalent in a community property state or territory?	From To Same as Debtor From To (Community property

Jacobs-Kennedy Kim Renea Debtor 1 Case number arang 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No Yes. Fill in the details. Debtor 2 **Debtor 1** Gross income Sources of income Sources of income Gross income (before deductions and Check all that apply. (before deductions and Check all that apply. exclusions) exclusions) Wages, commissions, Wages, commissions, 38.211.18 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business ■ Wages, commissions, Wages, commissions, For last calendar year: 44,968.71 bonuses, tips bonuses, tips (January 1 to December 31, 2017 Operating a business Operating a business ■ Wages, commissions, Wages, commissions, For the calendar year before that: bonuses, tips 33,909.00 bonuses, tips (January 1 to December 31, $\frac{2016}{yyyy}$ Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income **Gross income from** Sources of income each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy:

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

For last calendar year: (January 1 to December 31,

For the calendar year before that:

(January 1 to December 31,

Kim

Renea

Jacobs-Kennedy

-	Nomo	1.0
	Name	

Case number (if known)

Da	•
Ρа	

6.

List Certain Payments You Made Before You Filed for Bankruptcy

Are eith	er Deb	otor 1's or Debto	ır 2'e dehte	nrimarily co	nsumer dehts	≈ ?		
				_			e defined in 11 U.S.C. § 101	(8) as
	"incur	red by an individ	ual primarily	for a person	al, family, or h	ousehold purpose."		•
	During	g the 90 days bef	fore you filed	for bankrup	tcy, did you pa	y any creditor a total of	\$6,225* or more?	
	□ N	o. Go to line 7.						
		total amount y child support	ou paid that and alimony	t creditor. Do . Also, do no	not include pa t include paym	ayments for domestic su ents to an attorney for t		
	* Sub	ject to adjustmen	t on 4/01/16	and every 3	years after the	at for cases filed on or a	fter the date of adjustment.	
Z Yes	. Debto	or 1 or Debtor 2	or both hav	e primarily	consumer del	ots.		
	During	g the 90 days bet	fore you filed	i for bankrup	tcy, did you pa	y any creditor a total of	\$600 or more?	
	v	o. Go to line 7.						
	□ Y	creditor. Do n	ot include pa	ayments for d	domestic supp	\$600 or more and the to ort obligations, such as by for this bankruptcy cas		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
	;	Creditor's Name						Car
	•							☐ Credit card
		Number Street						Loan repayment
			 					☐ Suppliers or vendors
								☐ Other
	,	City	State	ZIP Code				
						•		
	,	Creditor's Name				\$	_ \$	☐ Mortgage
								☐ Car
	,	Number Street	<u> </u>		 			Credit card
								Loan repayment
	•							Suppliers or vendors
	;	City	State	ZiP Code				Other
						\$	\$	
	,	Creditor's Name				Φ	<u> </u>	☐ Mortgage
								☐ Car
		Number Street						Credit card
								Loan repayment
				_				Suppliers or vendors
		City	State	ZIP Code				Other

Debtor 1	Kim	Renea	Jacobs-Nei	ineuy	Case number (if known)_	
-court	First Name	Middle Name Last Name		-	issue process	
Insid corpo agen such	ders include your orations of which nt, including one nas child suppor	for a business you operate a	ers; relatives of any or person in control, or	general partners; p r owner of 20% or i	eartnerships of which more of their voting	who was an insider? In you are a general partner; securities; and any managing domestic support obligations,
□ Y		nents to an insider.				
	res. List all payri	ions to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
				\$	\$	
	Insider's Name					
	Number Street					
	City	State ZIP Code	3	•		
	Insider's Name			\$	_ \$	
	Number Street					

	City	State ZIP Code	9			
an iı	nsider? ude payments or	e you filed for bankruptcy, n debts guaranteed or cosign		payments or trans	sfer any property o	n account of a debt that benefi
		nents that benefited an insid	er.			
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
				\$	\$	
	Insider's Name					
	Number Street					
	City	State ZIP Cod	e			
				\$	_ \$	
	Insider's Name					
	Number Street					
	City	State ZIP Cod	e			

Renea

Jacobs-Kennedy

K	ll.	T	1	

Case number (if known)

Part 4:	Identify	Legal	Actions,	Repossession	ons, and	Foreclosure
CL C -V.				.robeccco.	J.10, aa	

and	t all such matters, inclu d contract disputes. No	iding personal injury	y cases, small c	aims actions, div	orces, collection su	uits, patemity	actions, suppor	t or custody modificatio
	Yes. Fill in the details.							
			Nature of the	case	Court or age	ncy		Status of the case
	_		Lawsuit for	car loan	52-1 Distr	ict Court		
	Case title	ity Alliance	_		Court Name			— Pending
	Credit Union v. I	Kim Kennedy			48150 Gra	and River		On appeal
		-			Number Street			Concluded
	Case number	04255 SC			Novi	MI -	4837	
	Case manager		-		City	State	ZIP Code	
	Case title				Court Name			— Pending
			-		Court Name			On appeal
					Number Street			Concluded
	Case number		-		City	State	ZIP Code	_
					O.I.J		2 2 2 2 2	
	No. Go to line 11. Yes. Fill in the information	ation below.						
	Yes. Fill in the informa		20	scribe the propert	y		Date	Value of the property
	Yes. Fill in the information of	ation below. motive Financia	20		y		Date Nov. 2017	Value of the property 17,563.56
	Yes. Fill in the information of	motive Financia	20		y			
	Lincoln Auto Creditor's Name PO Box 550	motive Financia	20 <u>1</u>	16 Lincoln				
	Yes. Fill in the information of	motive Financia	20 II	16 Lincoln	ed			
	Lincoln Auto Creditor's Name PO Box 550	motive Financia	20 II	16 Lincoln plain what happen Property was re	ed epossessed.			
	Lincoln Auto Creditor's Name PO Box 550 Number Street	motive Financia	20 al Ex	olain what happen Property was re	ed epossessed. oreclosed.			
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit	motive Financia 00 MI 4	20 li Ex Ex 8255	16 Lincoln plain what happen Property was re Property was for	ed epossessed. oreclosed. jarnished.	levied.		
	Lincoln Auto Creditor's Name PO Box 550 Number Street	motive Financia	20 Ex	16 Lincoln plain what happen Property was re Property was for	ed epossessed. oreclosed. arnished. uttached, seized, or	levied.		
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit	motive Financia 00 MI 4	20 Ex	olain what happen Property was re Property was for Property was go Property was a	ed epossessed. oreclosed. arnished. uttached, seized, or	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit	motive Financia 00 MI 4	20 Ex	olain what happen Property was re Property was for Property was go Property was a	ed epossessed. oreclosed. arnished. uttached, seized, or	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit City Creditor's Name	motive Financia 00 MI 4	20 Ex	olain what happen Property was re Property was for Property was go Property was a	ed epossessed. oreclosed. arnished. uttached, seized, or	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit City	motive Financia 00 MI 4	20 Ex.	olain what happen Property was re Property was for Property was go Property was a	ed epossessed. oreclosed. jarnished. uttached, seized, or	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit City Creditor's Name	motive Financia 00 MI 4	20 Ex.	plain what happen Property was for Property was go Property was a scribe the property plain what happen	ed epossessed. oreclosed. jarnished. uttached, seized, or	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit City Creditor's Name	motive Financia 00 MI 4	20 st	plain what happen Property was re Property was g Property was a Property was a Property was a Property was a	eed epossessed. oreclosed. arnished. attached, seized, or y eed epossessed. oreclosed.	levied.	Nov. 2017	\$17,563.56
	Lincoln Auto Creditor's Name PO Box 550 Number Street Detroit City Creditor's Name	motive Financia 00 MI 4	20 ll	plain what happen Property was re Property was g Property was a scribe the property Property was n Property was n Property was n	eed epossessed. oreclosed. arnished. attached, seized, or y eed epossessed. oreclosed.		Nov. 2017	\$17,563.56

Kim Renea Jacobs-Kennedy Debtor 1 Case number (if kno 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☑ No ☐ Yes. Fill in the details. Date action Amount Describe the action the creditor took was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No ☐ Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Value Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts per person Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you Value Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts

Number Street

State ZIP Code

Person's relationship to you

Official Form 107

City

Person to Whom You Gave the Gift

btor 1	Kim	Renea		Case number (if known)	
	First Name N	iiddle Name L	ast Name		
Witi	nin 2 years before y	ou filed for bankr	uptcy, did you give any gifts or contri	butions with a total value of more than	\$600 to any charity?
Ø	No				
	Yes. Fill in the detail	s for each gift or co	ntribution.		
	Gifts or contribution that total more than		Describe what you contributed	Date you contributed	Value
	Charity's Name		_		\$
			_		\$
	Number Street		_		
	City State	ZIP Code	_		
		_			
art 6	List Certain	Losses			
	Describe the proper how the loss occurr	ty you lost and ed	Describe any insurance coverage for Include the amount that insurance has claims on line 33 of Schedule A/B: Prop	paid. List pending insurance	Value of property lost
					\$
	=		•		
art 7		Payments or Tra			
you	consulted about s	eeking bankruptc	y or preparing a bankruptcy petition?	n your behalf pay or transfer any prope for services required in your bankruptcy.	rty to anyone
	No Yes. Fill in the detai	ls.			
			Description and value of any propert	y transferred Date payment of transfer was made	or Amount of paymen
	Person Who Was Paid				
	Number Street	•	-		\$
	City	State ZIP Code	- -		\$
	Email or website address				
	Person Who Made the P	tormost if Net Ver-	_		
	COSUL VVIIO WARDS UTO P	aymon, a NOL TOU			

btor 1	Kim	Renea	Jacobs-Kennedy	Case number (# known)		
J.U	First Name	Middle Name Last	Name	oddo nambor (raam)		
			, and			ally warms you before the Wall of the Health Street Co. 1 (1) had been a
			Description and value of any property	transferred	Date payment or transfer was made	Amount of payment
					uansiei was made	payment
	Person Who Was Pa	id				•
	Number Oterst					>
	Number Street					\$
	City	State 7/D Code				
	City	State ZIP Code				
			-			
	Email or website add	iress				
	Person Who Made th	ne Payment, if Not You				
1884				babali aa Annu		
			tcy, did you or anyone else acting or tors or to make payments to your cn		ister any property t	o anyone wno
		ayment or transfer that y				
V	No					
	Yes. Fill in the de	etails.				
			Description and value of any property	transferred	Date payment or	Amount of paym
					transfer was made	
	Person Who Was Pa	aid	•			
	Number Street		•			\$
						\$
	City	State ZIP Code	•			
			ptcy, did you sell, trade, or otherwise	e transfer any property t	o anyone, other th	an property
			business or financial affairs? made as security (such as the granting	of a security interest or n	nortgage on your pro	perty).
	_	and transfers that you ha	ve already listed on this statement.			
Ø		. A = 16=				
ш	Yes. Fill in the de	etalis.				
			Description and value of property transferred	Describe any property or debts paid in excha		 Date transfe was made
	Person Who Receive	ed Transfer				
	Number Street					
	City					
		State ZIP Code				
	·					
	·	State ZIP Code				
	Person's relations	ship to you				
	·	ship to you				
	Person's relations	ship to you				
	Person's relations	ship to you				
	Person's relations	ship to you				

1 First Name	Renea Middle Name Last Na	Jacobs-Kennedy	Case number (# look	wт)	
	These are often called ass	etcy, did you transfer any proper set-protection devices.)	ty to a self-settled trus	st or similar device of w	rhich you
		Description and value of the prope	rty transferred		Date transfe was made
Name of trust					
<u> </u>					
		, Instruments, Safe Deposit y, were any financial accounts o			
Yes. Fill in the d	letails.	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance be closing or trans
Name of Financial I	nstitution	xxxx	Checking		\$
Number Street			Savings Money market		
City	State ZIP Code		Brokerage Other		
Name of Financial I	nstitution	xxxx	Checking Savings		\$
Number Street			☐ Money market ☐ Brokerage		
City	State ZIP Code		Other		
o you now have, o ecurities, cash, or 1 No		year before you filed for bankru	otcy, any safe deposit	box or other depositor	y for
Yes. Fill in the d	letails.				
		Who else had access to it?	Describe th	e contents	Do you s have it?

☐ No ☐ Yes Name of Financial Institution Name Number Street Number Street City State ZIP Code City State ZIP Code

Kim Renea Jacobs-Kennedy Debtor 1 Case number (# km 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Q Yes. Fill in the details. Do you still Who else has or had access to it? Describe the contents have it? ☐ No Name of Storage Facility ☐ Yes Name Number Street Number Street CityState ZIP Code City State ZIP Code Part 9: **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **V** No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street ZIP Code City City State **ZIP Code** Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. □ Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **Ø** No Yes. Fill in the details. Date of notice Environmental law, if you know it Governmental unit Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code

No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site		_	
	Governmental unit		
Number Street	Number Street	_	
	City State ZIP Code	_	
City State	ZIP Code		
	dicial or administrative proceeding under a	ny environmental law? Include settleme	nts and orders.
No Yes. Fill in the details.			
103.1 iii iii the details.	Court or agency	Nature of the case	Status of the
Case title			_
	Court Name		Pending
			On appea
	Number Street		☐ Conclude
	Number Street		Conclude
Case number	Number Street City State ZIP C	eode .	☐ Conclude
	City State ZIP C		☐ Conclude
11: Give Details About	City State ZIP C	y Business	
11: Give Details About thin 4 years before you filed	City State ZIP C Your Business or Connections to An for bankruptcy, did you own a business or	y Business have any of the following connections to	
11: Give Details About thin 4 years before you filed to A sole proprietor or self-	City State ZIP C E Your Business or Connections to An for bankruptcy, did you own a business or employed in a trade, profession, or other a	y Business have any of the following connections to	
11: Give Details About thin 4 years before you filed to A sole proprietor or self-	City State ZIP of the Your Business or Connections to Andron for bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability particular trades.	y Business have any of the following connections to	
11: Give Details About thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi	City State ZIP of the Your Business or Connections to Andron for bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability particular trades.	y Business have any of the following connections to	
11: Give Details About thin 4 years before you filed it A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or m	City State ZIP of the Your Business or Connections to Andron to Experimental Control of the Cont	ny Business have any of the following connections to activity, either full-time or part-time rtnership (LLP)	
thin 4 years before you filed to thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or many An owner of at least 5% of the Above applies	City State ZIP of a Your Business or Connections to Andron bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability participal parti	have any of the following connections to activity, either full-time or part-time rtnership (LLP)	
thin 4 years before you filed to thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or many of the above applied to the above above above applied to the above above applied to the above applied to	City State ZIP of a Your Business or Connections to Andron bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability participal banks of a corporation of the voting or equity securities of a corporation	have any of the following connections to activity, either full-time or part-time rtnership (LLP)	
thin 4 years before you filed to thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or many an owner of at least 5%. No. None of the above applied Yes. Check all that apply about the self-self-self-self-self-self-self-self-	City State ZIP of a Your Business or Connections to Andron bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability participal parti	have any of the following connections to activity, either full-time or part-time rtnership (LLP) pration asiness. Employer Identification	any business?
thin 4 years before you filed to thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or many An owner of at least 5% of the Above applies	City State ZIP of a Your Business or Connections to And for bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability paid paranaging executive of a corporation of the voting or equity securities of a corporation es. Go to Part 12.	have any of the following connections to activity, either full-time or part-time rtnership (LLP) pration siness. Employer Identification Do not include Social	n number Security number or ITIN.
thin 4 years before you filed to thin 4 years before you filed to A sole proprietor or self- A member of a limited lia A partner in a partnershi An officer, director, or many an owner of at least 5%. No. None of the above applied Yes. Check all that apply about the self-self-self-self-self-self-self-self-	City State ZIP of a Your Business or Connections to And for bankruptcy, did you own a business or employed in a trade, profession, or other ability company (LLC) or limited liability paid paranaging executive of a corporation of the voting or equity securities of a corporation es. Go to Part 12.	have any of the following connections to activity, either full-time or part-time rtnership (LLP) pration siness. Employer Identification Do not include Social	o any business? n number Security number or ITIN.
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1				Jacobs-Kennedy	
	First Name	Middle Name	Last N	lame	Case number (# known)
				Describe the nature of the business	Employer Identification number
_					Do not include Social Security number or ITIN.
В	usiness Name				EIN:
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Nu	umber Street			Name of accountant or bookkeeper	Dates business existed
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Ci	ity	State	ZIP Code		
stitul Í No	tions, creditor	rs, or othe	r parties.	tcy, did you give a financial stateme	ent to anyone about your business? Include all financial
Yes	s. Fill in the de	etails belo	w.		
				Date issued	
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Last Name
Last Name

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 4: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	reditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

Kim

Renea

Jacobs-Kennedy

75			

Case number (If known)

Part 2: **List Your Unexpired Personal Property Leases**

ssumed?
MMATINI STATE STAT

Alliance Catholic Credit Union PO Box 37035 Bloomington, IA 50037-0035

Allied Business Services PO Box 1799 Holland, MI 49422

Ally PO Box 380902 Bloomington, MN 55432-0902

Alltran Financial, LP PO Box 601 Sauk Rapids, MN 56379

Amazon Credit Cards PO Box 94014 Palatine, IL 60094-4014

American Express Box 0001 Los Angeles, CA 90096-8000

Beaumont 3601 W. 13 Mile Rd. Royal Oak, MI 48073

Beaumont Health PO Box 554878 Detroit, MI 48255

Beaumont Hospitals 750 Stephenson Highway Troy, MI 48007-5042

Best Buy Credit Services PO Box 78009 Phoenix, AZ 85062-8009

Botsford Hospital Emergency 28050 Grand River Ave. Farmington Hills, MI 48336

BP Visa PO Box 530942 Atlanta, GA 30353-0942 Capital One PO Box 6942 Carol Stream, IL 60197-6492

Capital One PO Box 71087 Charlotte, NC 28272-1087

Chrysler Capital PO Box 660647 Dallas, TX 75266

Citibank Sears Mastercard PO Box 9001055 Louisville, KY 40290-1055

Client Services, Inc. 3451 Harry S. Truman Blvd St. Charles, MO 63301

Community Alliance Credit Union 39500 Highpointe Blvd. Novi, MI 48375

Convergent Outsourcing, Inc. PO Box 9004 Renton, WA. 98057-9004

Dicks Sporting Goods PO Box 960012 Orlando, FL 32896-0012

Discount Tires PO Box 960061 Orlando, FL 32896-0061

Disney PO Box 94014 Palatine, IL 60094-4014

ERC
PO Box 23870
Jacksonville, FL 32241

Fedloan Servicing PO Box 530210 Atlanta, GA 30353 First Source Advantage, LLC PO Box 628 Buffalo, NY 14240

Global Credit Collection Corp 5440 N. Cumberland Ave., Ste. 300 Chicago, IL 60656

Home Depot PO Box 78011 Phoenix, AZ 85062-8011

Hospital Consultants, PC 3450 Momentum Place Chicago, IL 60689-5334

Juniper PO Box 60517 City of Industry, CA 91716-0517

Kohl's PO Box 2983 Milwaukee, WI 53201-2983

Kroger PO Box 790408 St. Louis, MO 63179-0408

Lincoln Automotive Financial Services Dept. 194101 PO Box 55000 Detroit, MI 48255

Lord & Taylor PO Box 4144 Carol Stream, IL 60197-4144

Loveloft PO Box 659569 SanAntonio, TX 78265-9569

Macy's PO Box 9001094 Louisville, KY 40290-1094 Macy's American Express PO Box 9001108 Louisville, KY 40290-1108

Midas PO Box 960061 Orlando, FL 32986-0061

Midland Credit Management, Inc. PO Box 60578 Los Angeles, CA 90060

M.I.N.D. 28595 Orchard Lake Rd., Ste. 200 Farmington Hills, MI 48334-2979

NCB Management Services Inc. PO Box 1099 Langhorne, PA 19047

PNC Bank
PO Box 856177
Louisville, KY 40285-6177

PNC Bank PO Box 747032 Pittsburg, PA 15274-7032

Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541

Radius Global Solutions PO Box 390905 Minneapolis, MN 55439

RMP Services 8155 Executive Court, Ste. 10 Lansing, MI 48917

Sam's Club PO Box 960013 Orlando, FL 32896-0013

Sears PO Box 78051 Phoenix, AZ 85062-8051 Weber & Olcese, PLC PO Box 1330 Birmingham, MI 48012

Westgate Resorts PO Box 659617 San Antonio, TX 78265-9617